Only

STATEMENT OF

PAGE 1 / 146 =

FEC FORM 1			ANIZA		N				Office	Use Or	alv.		
1. NAME OF		(Check	if name	Exampl	e:If typing, t	уре	12FF	74м5	Office	036 01	Пу		
COMMITTEE (in	full)	is chan	ged)	over the	e lines.		1211	Chit		-			
NRCC													<u>.</u>
ADDRESS (number a	nd street)	320 FIRST STR	EET SE										
(Check if a is changed		WASHINGTON CITY A					DC		20003	ZI	P COI	DE A	
COMMITTEE'S E-MA	AIL ADDRES	SS											
(Check if a is changed		kdavis@hda	fec.com										
		Optional Secon	d E-Mail Add	ress									1
COMMITTEE'S WEB (Check if a is changed	address	PRESS (URL) www.nrcc.org											
2. DATE 02		2021	Y										
3. FEC IDENTIFIC	CATION NU	MBER ▶	C co	0075820									
4. IS THIS STATEN	MENT _	NEW (N)	OR	×	AMENDED) (A)							
certify that I have e	examined thi	s Statement and	to the best of	of my kno	wledge and	belief it is	s true, o	correct	and co	mplete	١.		
Type or Print Name	of Treasurer	Davis, Keith A.,	,,										
Signature of Treasure	er <i>Davis</i> ,	Keith A., , ,		[El	ectronically Fi	[led] [Date	02	′ [05	/ Y	2021	Y
NOTE: Submission of		ous, or incomplete							the pe	nalties	of 2 U.	S.C. §	437g.
Office Use				Fe	r further information (deral Election (dependent)	Commission				EC F			

Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE ate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.))
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affi		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	(Dama ayatia
(d)	This committee is a NAT (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FFO F4 - 1 (Day)	22/2000)	Dom: 2
FEC Form 1 (Revised C		Page 3
NRCC		
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
COLE COMBINED CO	DMMITTEE	
Mailing Address	12176 CHANCERY STATION CIRCLE	
	RESTON VA 2019) –
	CITY STATE	ZIP CODE
_		
Relationship: Connected	I Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in	possession of committee
Davis, Keit	th A., , ,	
Full Name	,320 First Street SE	
Mailing Address		
	Washington DC 2000	3
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202 –	429 - 7000
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Davis, Keit	h A., , ,	1
of Treasurer	1999 First Otto 4 9F	
Mailing Address	320 First Street SE	
	Washington DC 2000	3
	CITY STATE	ZIP CODE
Title or Position Treasurer		429 - 7000

FEC Form 1 (Revi	sea n s 1 s 1 s 1 s 1 s 1 s 1 s 1 s 1 s 1 s		Page 4
Full Name of Designated Williams Agent L	s, Katy, , ,		
Mailing Address	320 First Street SE		
	Washington CITY	DC 200 STATE	ZIP CODE
Title or Position Assistant Treasurer		e number 202 -	- 429 - 7000
• .			
safety deposit boxes or m Name of Bank, Depository Wells Mailing Address			
Name of Bank, Depository Wells	y, etc. s Fargo		
Name of Bank, Depository Wells	y, etc. s Fargo	VA 221	02
Name of Bank, Depository Wells	y, etc. S Fargo 1753 Pinnacle Drive	VA 221	02 ZIP CODE
Name of Bank, Depository Wells Mailing Address	y, etc. Fargo 1753 Pinnacle Drive McLean CITY		
Name of Bank, Depository Wells	y, etc. Fargo 1753 Pinnacle Drive McLean CITY y, etc.		
Name of Bank, Depository Wells Mailing Address Name of Bank, Depository	y, etc. S Fargo 1753 Pinnacle Drive McLean CITY y, etc.		
Name of Bank, Depository Wells Mailing Address Name of Bank, Depository	y, etc. Fargo 1753 Pinnacle Drive McLean CITY y, etc.	STATE	ZIP CODE
Name of Bank, Depository Wells Mailing Address Name of Bank, Depository	y, etc. Fargo 1753 Pinnacle Drive McLean CITY y, etc.		ZIP CODE

FEC Form 1S (Revised 02/2017)

n). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
HICE FREEDOM	FUND 		
Mailing Address	2470 DANIELLS BRIDGE ROAD		
	SUITE 121		
	ATHENS	GA	30606
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
Full Name			
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
TITLE OR POSITION	▼ CITY ▲		
anks or Other Depositor	CITY A Te	STATE ▲	ZIP CODE A
anks or Other Depositor fety deposit boxes or ma	CITY A Te ries: List all banks or other depositories in which sintains funds.	STATE ▲	ZIP CODE A
anks or Other Depositor fety deposit boxes or ma	CITY A Te	STATE ▲	ZIP CODE A
anks or Other Depositor fety deposit boxes or ma	CITY A Te ries: List all banks or other depositories in which sintains funds.	STATE ▲	ZIP CODE A
anks or Other Depositor fety deposit boxes or material management of Bank, pepository, etc.	ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A
anks or Other Depositor fety deposit boxes or material management of Bank, pepository, etc.	ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	1	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
ADAM KINZINGE	R - FUTURE 1ST COMMITTEE		
Mailing Address	P.O. BOX 2381		
	OTTAWA		61350
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which saintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, Comm	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or materials and the comments of Bank, Com	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which saintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which reintains funds. Description:	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material boxes or material boxes. Comme epository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which reintains funds. Description:	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundrai s	sing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	ed Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
EMMER VICTO	RY COMMITTEE		
	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
	ATHENS	L GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connec	cted Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8. Designated Agent: Ider	ntify by name, address (phone number - optional)		
8. Designated Agent: Ider	ntify by name, address (phone number – optional)		
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	ON V	STATE A	
Full Name	ON V	1	
Full Name Mailing Address TITLE OR POSITIO	CITY ▲ Te itories: List all banks or other depositories in which the	lephone Number	ZIP CODE 🛦
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes safety deposit boxes or	CITY ▲ CITY ▲ Te itories: List all banks or other depositories in which to maintains funds.	lephone Number	ZIP CODE 🛦
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes safety deposit boxes or	CITY ▲ Te itories: List all banks or other depositories in which the	lephone Number	ZIP CODE 🛦
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposes safety deposit boxes or Name of Bank, Coul	CITY ▲ CITY ▲ Te itories: List all banks or other depositories in which to maintains funds.	lephone Number	ZIP CODE 🛦
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposs safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ CITY ▲ itories: List all banks or other depositories in which the maintains funds. http Club Bank	lephone Number	ZIP CODE 🛦
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposs safety deposit boxes or Name of Bank, Depository, etc.	CITY ▲ CITY ▲ itories: List all banks or other depositories in which the maintains funds. http Club Bank	lephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	▼ pries: List all banks	or other depositories in whice	STATE A Telephone Number	ZIP CODE ZIP CODE ts funds, holds accounts, rents
TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc.	vries: List all banks aintains funds. of Tampa	CITY or other depositories in whice	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	vries: List all banks aintains funds. of Tampa	CITY or other depositories in whice	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	▼ pries: List all banks	CITY A	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION	V	CITY A	STATE A Telephone Number	ZIP CODE A
		CITY A	STATE ▲	
- Tanana G				
- Table 1				1 1 1
Mailing Address				
Full Name				
		s (phone number – optional)	in i unurusing mepresent	Leadership 1 AO Sp
	d Organization		int Fundraising Represent	
Relationship:		CITY A	STATE A	ZIP CODE A
	WARRENTON		, VA ,	20186
Mailing Address	#303			
AA. W.	332 W. LEE HIG	SHWAY		
MULLIN VICTOR	_	liated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
4.				
A			FEC ID number	C
3.			FEC ID number	C
3.		1	FEC ID number	C
1			FEC ID number	

FEC Form 1S (Revised 02/2017) for Lines 5(g) of

h). Joint Fundraisir	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SMITH VICTORY			
I			
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc. First Network Part of Sanks or Control of Sanks or	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
ô.		Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	TEAM MCCAUL V	ICTORY COMMITTEE		
	Mailing Address	228 S. WASHINGTON STREET		
	-	SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE A
	Connected		Fundraising Representa	
		ů d	0 1	
3.	Designated Agent: Identify	by name, address (phone number - optional)		
3.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
3.		by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	by name, address (phone number – optional)		
3.	Full Name	CITY	STATE A	ZIP CODE A
3.	Full Name	CITY A		
3.	Full Name	CITY A	STATE ▲	
3.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele Ties: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY A Tele Ties: List all banks or other depositories in which the	STATE A	ZIP CODE A
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. f Nevada	STATE A	ZIP CODE A
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. f Nevada 8505 Centennial Parkway	STATE A ephone Number ne committee deposits	ZIP CODE ZIP CODE s funds, holds accounts, rents
3.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. f Nevada	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundrais	sing Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	ed Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
WALBERG VIC	IORY FUND		
			<u> </u>
	PO BOX 1362		
Mailing Address			
	JACKSON	MI	49204
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Decignated Agents Idea	tify by name address (abone number, entional)		
Designated Agent: Iden Full Name	tify by name, address (phone number – optional)		
	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	tify by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name L L L	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit safety deposit boxes or in	CITY ▲ CITY ▲ tories: List all banks or other depositories in which to maintains funds. Harris Bank NA 1 West Main Street	he committee deposit	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions afety deposit boxes or the safety deposit boxes or the safety deposit boxes or the safety depository, etc.	CITY ▲ CITY ▲ tories: List all banks or other depositories in which to maintains funds. Harris Bank NA	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraising	Participant:			
1.		FEC II	D number	C
2.		FEC II	D number	C
3.		FEC II	D number	C
4.		FEC II	D number	С
=	Organization, Affiliated Committee, Joint F	undraising Re	presentativ	e, or Leadership PAC Spor
BOST VICTORY F	UND			
Mailing Address	824 S. MILLEDGE AVENUE			
	SUITE 101			
	ATHENS		GA	30605
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	Joint Fundraisin	g Represent	ative Leadership PAC S
Connected	Organization Affiliated Committee by name, address (phone number – optional		g Represent	ative Leadership PAC S
Connected esignated Agent: Identify			g Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name			g Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name			g Represent	Leadership PAC S
Connected esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optiona		g Represent	
Connected esignated Agent: Identify Full Name	by name, address (phone number – optiona		STATE A	
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or mail	by name, address (phone number – optional control of the control o	Telephone N	STATE A	ZIP CODE A
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorifety deposit boxes or main ame of Bank, First Name pository, etc.	by name, address (phone number – optional control of the control o	Telephone N	STATE A	ZIP CODE A
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or mail	by name, address (phone number – optional control of the control o	Telephone N	STATE A	ZIP CODE A
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositorifety deposit boxes or main ame of Bank, First Name pository, etc.	by name, address (phone number – optional control of the control o	Telephone N	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected KATKO VICTOR	Organization, Affiliated Committee, Joi	nt Fundraising Representativ	ve, or Leadership PAC Sponsor
KATKO VICTOR	FUND		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , , , , , , , , , , , , , , , , , ,	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC Sponsor
Full Name	y by name, address (phone number – op		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
 Banks or Other Deposito safety deposit boxes or ma 	ries: List all banks or other depositories aintains funds.	in which the committee deposi	its funds, holds accounts, rents
Name of Bank, Depository, etc.	erity Bank		
Mailing Address	207 S. Clay		
	Ennis	TX	75119
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraisi n	g Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number C
	4.		FEC ID number
6.		Organization, Affiliated Committee, Joint Fundrais Y COMMITTEE 2020	sing Representative, or Leadership PAC Sponsor
	Mailing Address	47 FLINTLOCK DRIVE	
		SHIRLEY	NY 11967
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	d Organization Affiliated Committee	undraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)	
	Mailing Address		
	TITLE OR POSITION	_ CITY ▲	STATE ▲ ZIP CODE ▲
	IIILE ON POSITION	I	phone Number
	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds. unties Bank 210 N. Tehama	e committee deposits funds, holds accounts, rents
		Willows	CA 95988 - - -
		CITY A	STATE ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spor
HUIZENGA VICT	ORY FUND		
	P.O. Box 2485		
Mailing Address			
	Springfield 	VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identify	d Organization Affiliated Committee Joi	int Fundraising Represent	Leadership PAC S
esignated Agent: Identify		int Fundraising Represent	Leadership PAC S
esignated Agent: Identify		int Fundraising Represent	Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify Full Name	y by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositions are of Bank, epository, etc.	ries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name	ries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraising	Participant:		0
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected (Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spor
ROUZER CONGR	ESSIONAL TRUST		
Mailing Address	P.O. Box 701		
	Clayton	NC NC	27528
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		nt Fundraising Representa	Leadership PAC S
	by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identify		nt Fundraising Representa	Leadership PAC S
signated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
signated Agent: Identify Full Name			Leadership PAC S
Full NameMailing Address	by name, address (phone number – optional)		
signated Agent: Identify Full Name	by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mailume of Bank, Franklin	by name, address (phone number – optional) CITY es: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mail ame of Bank, Frankling pository, etc.	by name, address (phone number – optional) CITY CITY es: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mailume of Bank, Franklin	by name, address (phone number – optional) CITY CITY es: List all banks or other depositories in which ntains funds. Synergy Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mail ame of Bank, Frankling pository, etc.	by name, address (phone number – optional) CITY CITY es: List all banks or other depositories in which ntains funds. Synergy Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

RODNEY DAVIS VIC	.O. Box 9891 rlington CITY ▲	VA STATE A Joint Fundraising Represer	C C C ve, or Leadership PAC Spons
3. 4. A.	nization, Affiliated Committee, Joint TORY FUND O. Box 9891 rlington CITY Affiliated Committee	FEC ID number FEC ID number Fundraising Representati VA STATE 4 Joint Fundraising Represer	ve, or Leadership PAC Spons 22219 ZIP CODE ZIP CODE
4.	nization, Affiliated Committee, Joint TORY FUND O. Box 9891 rlington CITY Affiliated Committee	FEC ID number Fundraising Representati VA STATE A Joint Fundraising Represer	ve, or Leadership PAC Spons 22219 ZIP CODE
4.	nization, Affiliated Committee, Joint TORY FUND O. Box 9891 rlington CITY Affiliated Committee	Fundraising Representati VA STATE A Joint Fundraising Represer	ve, or Leadership PAC Spons 22219 ZIP CODE
RODNEY DAVIS VIC	TORY FUND .O. Box 9891 rlington CITY ▲ anization Affiliated Committee	VA STATE A Joint Fundraising Represer	22219 ZIP CODE A
RODNEY DAVIS VIC	TORY FUND .O. Box 9891 rlington CITY ▲ anization Affiliated Committee	VA STATE A Joint Fundraising Represer	22219 ZIP CODE A
Mailing Address A Relationship: Connected Organical Agent: Identify by r Full Name	.O. Box 9891 rlington CITY ▲ anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Mailing Address A Relationship: Connected Organicated Agent: Identify by resignated Agent:	rlington CITY anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Mailing Address A Relationship: Connected Organicated Agent: Identify by refull Name	rlington CITY anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Mailing Address A Relationship: Connected Organicated Agent: Identify by resignated Agent:	rlington CITY anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Relationship: Connected Organications Connected Organication Connected Orga	CITY A anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Relationship: Connected Organications Connected Organication Connected Orga	CITY A anization Affiliated Committee	STATE Joint Fundraising Represer	ZIP CODE A
Connected Organical Connected Organica Connected Org	Affiliated Committee	Joint Fundraising Represer	
esignated Agent: Identify by r			ntative Leadership PAC Sp
Mailing Address			
L			
TITLE OR POSITION ▼	CITY 🛦	STATE ▲	ZIP CODE ▲
		Telephone Number	
lame of Bank, Eagle Ban Depository, etc. Mailing Address		which the committee depos	sits funds, holds accounts, rent
Ale	exandria	ı VA ı	22314

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisi r	g Participant:	
	1		FEC ID number
	2.		FEC ID number C
	3.		FEC ID number C
	4.		FEC ID number C
6.		Organization, Affiliated Committee, Joint Fundra	raising Representative, or Leadership PAC Sponsor
	Mailing Address	22780 Indian Creek Drive	
		Suite 100	
		Dulles	VA 20166
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connecte	d Organization Affiliated Committee	Fundraising Representative Leadership PAC Sponso
8.	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Mailing Address		
		1	
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
		1	elephone Number
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds. Cal Bank 333 E. Main Street	the committee deposits funds, holds accounts, rents
		Midland	TX 48640
		CITY A	STATE ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisir	.g		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SAM GRAVES VI	CTORY FUND		
Mailing Address	2345 GRAND BLVD SUITE 2400		
	KANSAS CITY	I MO I	64108
Relationship:	CITY A	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mailing and the position of Bank, First F	y by name, address (phone number – optional) CITY CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mailing and the position of Bank, First F	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which aintains funds. Tinancial Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions are of Bank, epository, etc.	y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which aintains funds. Tinancial Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin		FEC ID number	
		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TURNER VICTOR	RY FUND		
Mailing Adduses	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
	ATHENS	GA I	30605
Relationship:	CITY A	STATE A	ZIP CODE A
Connected	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify	d Organization Affiliated Committee Joint	t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fundi UP VICTORY FUND	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
	BETHESDA	ı MDı	20824
Dalatianahin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or m ame of Bank, Flags	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi	ng Participant:			
1			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4			FEC ID number	С
Name of Any Connected	Organization, Affiliated Co	mmittee, Joint Fundra	ising Representativ	e, or Leadership PAC Sponsor
TE/WIE/WIEOD				
Mailing Address	824 S. MILLEDGE AVENU	JE		
	SUITE 101			
	ATHENS		GA GA	30605
Relationship:	C	ITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated	Committee Joint F	Fundraising Represent	ative Leadership PAC Sponso
Full Name	y by name, address (phone	number – optional)		
Mailing Address				
	CIT	Y A	STATE A	ZIP CODE A
TITLE OR POSITION	CIT	1		ZIP CODE A
TITLE OR POSITION Banks or Other Deposite safety deposit boxes or meaning the safety deposit boxes or	ories: List all banks or other	Tele	STATE ▲	ZIP CODE ZIP CODE s funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other aintains funds. nit Bank 11 West 23rd Street	Tele	STATE ▲	
Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	pries: List all banks or other aintains funds. nit Bank 11 West 23rd Street Panama City	Tele	STATE ▲	

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Page _23 **of** _146

g) or (h).	Joint Fundraising	Participant:				
1.				FE	C ID number	С
2				FE	C ID number	C
3.		1 1 1 1 1		 _	C ID number	C
4.				FE	C ID number	С
	of Any Connected C	_		t Fundraising	Representative	e, or Leadership PAC Sponso
			· <u>-</u> _			
M	Mailing Address	332 W LEE HWY #303				
					ν/Α .	20186
		WARRENTON			↓ VA	
Н	Relationship:	_	CITY A		STATE ▲	ZIP CODE ▲
Docigne					ising Represent	ative Leadership PAC Spor
	ated Agent: Identify				ising Represent	ative Leadership PAC Spor
Full	ated Agent: Identify				ising Represent	ative Leadership PAC Spor
Full	ated Agent: Identify				ising Represent	ative Leadership PAC Spor
Full	ated Agent: Identify	by name, address (p		onal)	ising Represent	ative Leadership PAC Spoi
Full Mai	ated Agent: Identify	by name, address (p	phone number – option	onal)		
Full Mai	ated Agent: Identify	by name, address (p	ohone number – optic	onal)		
Full Mai	ated Agent: Identify I	by name, address (p	ohone number – optic	onal)	STATE A e Number	
Banks safety d	ated Agent: Identify I	by name, address (p	ohone number – optic	onal)	STATE A e Number	ZIP CODE A
Banks safety d	ated Agent: Identify Name I Name IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	by name, address (p	ohone number – optic	onal)	STATE A e Number	ZIP CODE A
Banks safety d	ated Agent: Identify Name I Name IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	by name, address (p	ohone number – optic	onal)	STATE A e Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

SPRINGFIELD CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA Leadership PA CITY STATE ZIP CODE		ng Participant:		
FEC ID number C FEC ID number FEC ID	1.		FEC ID number	С
FEC ID number C Innected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S EADERSHIP FUND SPRINGFIELD CITY A STATE A ZIP CODE CITY A STATE A ZIP CODE CITY A STATE A ZIP CODE A	2.		FEC ID number	С
Affiliated Committee, Joint Fundraising Representative, or Leadership PAC SEADERSHIP FUND SPRINGFIELD CITY A STATE A ZIP CODE Leadership PAC STATE A ZIP CODE STATE A ZIP CODE A	3.		FEC ID number	С
SPRINGFIELD CITY A STATE A ZIP CODE COUNTY A STATE A STATE A ZIP CODE COUNTY A STATE A ZIP CODE COUNTY A STATE A ZIP CODE Affiliated Committee	4.		FEC ID number	C
SPRINGFIELD CITY A STATE A ZIP CODE COUNTY A STATE A STATE A ZIP CODE COUNTY A STATE A ZIP CODE COUNTY A STATE A ZIP CODE Affiliated Committee				
SPRINGFIELD CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA CITY A STATE A ZIP CODE COUNTY A STATE A ZIP CODE A STATE A ZIP CODE A STATE A ZIP CODE A	=	_	Iraising Representative	e, or Leadership PAC Spons
SPRINGFIELD CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA CITY A STATE A ZIP CODE AFFILIA ZIP CODE ZIP CODE	WILSON LEADER	RSHIP FUND		
SPRINGFIELD CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA CITY A STATE A ZIP CODE AFFILIA ZIP CODE ZIP CODE				
SPRINGFIELD CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA CITY A STATE A ZIP CODE AFFILIA ZIP CODE ZIP CODE		PO BOX 2456		
CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA : Identify by name, address (phone number – optional)	Mailing Address	1 0 50X 2400		
CITY A STATE A ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA : Identify by name, address (phone number – optional)				
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA : Identify by name, address (phone number – optional) STATE A ZIP CODE A		SPRINGFIELD	VA	22152
: Identify by name, address (phone number – optional) s CITY A STATE A ZIP CODE A	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
CITY A STATE A ZIP CODE A	esignated Agent: Identif	y by name, address (phone number – optional)		
CITY ▲ STATE ▲ ZIP CODE ▲	esignated Agent: Identif	y by name, address (phone number – optional)		
CITY ▲ STATE ▲ ZIP CODE ▲		y by name, address (phone number – optional)		
STATE ▲ ZIP CODE ▲	Full Name	y by name, address (phone number – optional)		
OTTON V	Full Name			
Telephone Number	Full Name	CITY	STATE A	ZIP CODE A
	Full Name	CITY A	1	
epositor	Full Name	y	by name, address (phone number – optional)	by name, address (phone number – optional)
	Address OR POSITION ther Deposito	CITY A CITY A ries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
Гexas Gulf Bank	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito fety deposit boxes or ma	CITY CITY Tries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
900 Town & Country Lane	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY CITY Cries: List all banks or other depositories in which aintains funds. Gulf Bank	Telephone Number	ZIP CODE A
900 Town & Country Lane	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or maintain the second	CITY A cries: List all banks or other depositories in which aintains funds. Gulf Bank 900 Town & Country Lane	Telephone Number	ZIP CODE A
900 Town & Country Lane ress	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or mainly deposit boxes or mainly depositor, etc.	CITY CITY CITY Ories: List all banks or other depositories in which aintains funds. Gulf Bank 900 Town & Country Lane Suite 100	Telephone Number	ZIP CODE S funds, holds accounts, rent

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
TEAW GALLAGH			
Mailing Address	1915 SOUTH WEBSTER AVE		
	STE D GREEN BAY	ı wı	54301
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected		oint Fundraising Represent	
Pull Name	by name, address (phone number – optional))	
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
Lilia de Position		Telephone Number	
Banks or Other Depositors safety deposit boxes or matching Address		ich the committee deposi	ts funds, holds accounts, rents
	Nashville	TN	37203
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

3.		FEC ID number	C
		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
STRONG AMERI	CA FUND		
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
			71D 00DE 4
Relationship:	CITY ▲ d Organization Affiliated Committee ✓ Join	STATE A	ZIP CODE ▲ ative Leadership PAC Sp
Connecte			
Connecte esignated Agent: Identif	d Organization Affiliated Committee		
connecte resignated Agent: Identif	d Organization Affiliated Committee		
esignated Agent: Identif	d Organization Affiliated Committee Join Ty by name, address (phone number – optional)	at Fundraising Represent	Leadership PAC Sp
Connecte Pesignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	at Fundraising Representation	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

g) or (h). Joint Fundrais	sing Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Iden Full Name	ntify by name, address (phone number – optional)		
	ntify by name, address (phone number – optional)		
Full Name	ntify by name, address (phone number – optional)		
Full Name	atify by name, address (phone number – optional)		
Full Name _ _ _ Mailing Address	CITY	STATE A	ZIP CODE A
Full Name	ON V		
Full Name Mailing Address TITLE OR POSITION Banks or Other Depositions afety deposit boxes or in	CITY ▲ CITY ▲ itories: List all banks or other depositories in which	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposit safety deposit boxes or in Name of Bank, Suno	CITY ▲ CITY ▲ itories: List all banks or other depositories in which maintains funds.	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or the safety deposit	CITY ▲ CITY ▲ itories: List all banks or other depositories in which maintains funds. crest Bank	STATE ▲	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or the safety deposit	CITY ▲ CITY ▲ itories: List all banks or other depositories in which maintains funds. crest Bank	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisin			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
PALMER VICTOR	RY COMMITTEE		
Mailing Address	1919 OXMOOR ROAD		
	#223		
	HOMEWOOD	ı ALı	35209
		STATE A	ZIP CODE A
Relationshin:	CITY A		ZIF CODE A
	CITY ▲ d Organization	t Fundraising Represent	
Connected	d Organization Affiliated Committee		
Connected esignated Agent: Identify	d Organization Affiliated Committee		
esignated Agent: Identify	d Organization Affiliated Committee		
esignated Agent: Identify	d Organization Affiliated Committee		
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee Join y by name, address (phone number – optional)		ative Leadership PAC Sp
Connected Pesignated Agent: Identify	Affiliated Committee y by name, address (phone number – optional) CITY	t Fundraising Represent	ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

r(h). Joint Fundraisin	g Participant:		
1.		FEC ID nur	mber C
2		FEC ID nur	mber C
3.		FEC ID nur	mber C
4		FEC ID nur	mber C
	Organization, Affiliated Committee, Jo	int Fundraising Represe	entative, or Leadership PAC Sponso
REED VICTORY	JOMIMITTEE		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS		GA 30605
Relationship:	CITY A	STA	ATE ▲ ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Rep	presentative Leadership PAC Spor
Full Name	by name, address (phone number – o		
Mailing Address			
	0.774		
TITLE OR POSITION	▼ CITY ▲	STAT	TE ▲ ZIP CODE ▲
		Telephone Number	er
Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories intains funds.	in which the committee of	deposits funds, holds accounts, rents
Name of Bank, Spring Depository, etc.	field First Community Bank		1 1 1 1 1 1 1 1 1 1
Mailing Address	2006 South Glenstone Avenue		
	Springfield		MO 65804

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5(g) c	or(h). Joint Fundraisin	g Participant:			
	1.		FEC II	D number	C
	2.		FEC II	D number	C
	3.		FEC II	D number	C
	4.		FEC II	D number	C
6.	Name of Any Connected ELISE VICTORY	Organization, Affiliated Committee, Joint	Fundraising Re	presentative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 500			
		GLENS FALLS		NY	12801
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Joint Fundraisin	g Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – option	nal)		
	Mailing Address				
	J				
	TITLE OF POOLTION	_ CITY ▲		STATE ▲	ZIP CODE A
	TITLE OR POSITION		Telephone N	lumber	
	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address		which the comm	ittee deposit	s funds, holds accounts, rents
		Old Bridge		NJ	08857
ı		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraisin	g Participant:			
	1	-	FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.		Organization, Affiliated Committee, Jo	oint Fundraising Re	epresentative	e, or Leadership PAC Sponsor
	TEAM ESTES				
		P.O. BOX 26141			
	Mailing Address				
		ALEXANDRIA		. \/\	22313
	Relationship:			STATE A	ZIP CODE A
		CITY ▲			
	Connected	I Organization Affiliated Committee	✗ Joint Fundraisi	ng Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - c	ptional)		
	Full Name				
	Mailing Address	1			
	Mailing Address				
		_ CITY ▲		STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	V CITT X			ZIF GODE A
			Telephone	Number	
	Davids on Other Davids				. Code holds accordenate
9.	safety deposit boxes or ma	ries: List all banks or other depositories intains funds.	s in which the comn	nittee deposit	s funds, noids accounts, rents
		Rim Bank			
	Depository, etc.	P.O. Box 241489			
	Mailing Address				
		Anchorage		L AK	99524
ı		CITY ▲		STATE ▲	ZIP CODE ▲

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or(h). Joint Fundraisi r	ng Participant:			
1.			FEC ID number	С
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	Organization, Affiliated DY BARR COMMI		aising Representativ	e, or Leadership PAC Sponsor
FRIENDS OF AN	LI LI LI LI LI LI			
Mailing Address	332 W. LEE HIGHWAY	,		
	#303			
	WARRENTON		VA VA	20186
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affilia	ted Committee	Fundraising Represent	ative Leadership PAC Spon
Pull Name Mailing Address	y by flame, address (pilo		1 1 1 1 1 1 1	
TITLE OR POSITION	▼	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION	▼ (1		ZIP CODE A
Banks or Other Depositor safety deposit boxes or m	ories: List all banks or oth aintains funds. e's United Bank	Te	STATE ▲ lephone Number	ZIP CODE ZIP CODE s funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or m	ories: List all banks or oth	Te	STATE ▲ lephone Number	
Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	pries: List all banks or oth aintains funds. e's United Bank 14 S. Moger Avenue	Te	STATE A lephone Number the committee deposit	s funds, holds accounts, rents
Banks or Other Deposite safety deposit boxes or m Name of Bank, Depository, etc.	ories: List all banks or oth aintains funds. e's United Bank	Te	STATE ▲ lephone Number	

FEC Form 1S (Revised 02/2017)

	g Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee,	Joint Fundraisi	ng Representative	e, or Leadership PAC Spon
MAST VICTORY	COMMITTEE			
Mailing Address	824 S MILLEDGE AVE STE 101			
	ATHENS		GA GA	30605
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Affiliated Committe	e X Joint Fur	ndraising Representa	ative Leadership PAC S
Full Name				
Mailing Address				
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Mailing Address TITLE OR POSITION	CITY A		STATE A	ZIP CODE A
	CITY A			
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TITLE OR POSITION anks or Other Depositor of the deposite boxes or material boxes or material boxes. Pinnace	CITY A	Telep	STATE ▲	ZIP CODE A
anks or Other Depositor dety deposit boxes or material arms of Bank, Pinnac epository, etc.	ries: List all banks or other depositor intains funds.	Telep	STATE ▲	ZIP CODE A
anks or Other Depositor dety deposit boxes or material arms of Bank, Pinnac epository, etc.	ries: List all banks or other depositor intains funds.	Telep	STATE ▲	ZIP CODE A

FEC Form 1S (Revised 02/2017)

n). Joint Fundraisin									
1.				_	FEC ID nui		C		=
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ame of Any Connected	Organization, A	ffiliated Comm	ittee, Joint I	- - undrais	ing Represe	ntative	, or Lead	ership PAC S	noq
MIKE ROGERS V	ICTORY								
Mailing Address	2523 WILSON	BOULEVARD							
	#4								
	ARLINGTON					VA	2220	1	
Relationship:		CITY	A		STA	ATE 🛦		ZIP CODE	
	d Organization	Affiliated Con	nmittee x	Joint Fu	ndraising Rep	resenta	tive	Leadership PA	
		Affiliated Con			ndraising Rep	presenta	tive	Leadership PA	
Connected esignated Agent: Identify		Affiliated Con			ndraising Rep	presenta	tive	Leadership PA	
Connected esignated Agent: Identify		Affiliated Con			ndraising Rep	presenta	tive	Leadership PA	
Connected esignated Agent: Identify	y by name, addre	Affiliated Con	ber – option	al)		presenta		Leadership PA	C S
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FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
lame of Any Connected ALLEN VICTOR		Committee, Joint Fund	Iraising Representativ	ve, or Leadership PAC Spons
Mailing Address	PO BOX 420521			
	ATLANTA		GA	30342
Relationship:		CITY A	STATE A	ZIP CODE ▲
Connecte		ted Committee X Join	nt Fundraising Represen	tative Leadership PAC Sp
Connecte	d Organization Affilia	ted Committee X Join	nt Fundraising Represen	tative Leadership PAC Sp
Connecte esignated Agent: Identi		ted Committee X Join	nt Fundraising Represen	tative Leadership PAC Sp
esignated Agent: Identi		ted Committee X Join	nt Fundraising Represen	tative Leadership PAC Sp
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esignated Agent: Identi Full Name Mailing Address	y by name, address (pho	ne number – optional)		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the companion of the compan	y by name, address (pho	ne number – optional) CITY ner depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	y by name, address (pho	ne number – optional) CITY ner depositories in which	STATE A	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>36</u> **of** <u>146</u>

h). Joint Fundraisi r	1	FFO ID I	C
1.		FEC ID number	
2.		FEC ID number	С
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4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
BUDD VICTORY			
Mailing Address	PO BOX 97275		
	RALEIGH	NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
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esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
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Full NameMailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing ame of Bank, US Ba	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ing Fartisipant.	FFO ID ******-	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
FERGUSON VIC	TORY FUND		
Mailing Address	P.O. BOX 420304		
	ATLANTA	GA L	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC S
	Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
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esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank, Amar	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which paintains funds. Ilo National Bank	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi r	ig Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
Davidson Victory	Fund		
<u> </u>			
Mailing Address	499 S. Capitol Street SW		
	Suite 407		
	Washington	l DC l	20003
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	0111 =	01/112 =	211 0002 =
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
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FEC Form 1S (Revised 02/2017)

r(h). Joint Fundraisi	O					
1.			F	EC ID number	С	
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4.			F	EC ID number	С	
Name of Any Connected		ffiliated Committee, Jo	int Fundraisin	g Representative	e, or Lead	ership PAC Spons
Mailing Address	824 S. MILLE	DGE AVENUE				
	SUITE 101					
				GA	3060	5 -
	ATHENS					
Relationship:	ATHENS	CITY 🛦		STATE A		ZIP CODE ▲
Connecte	d Organization	Affiliated Committee		STATE ▲	ative	ZIP CODE ▲ Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization	Affiliated Committee			ative	
Connecte Designated Agent: Identi	d Organization	Affiliated Committee			ative	
Connecte Designated Agent: Identi Full Name	d Organization	Affiliated Committee			ative	
Connecte Designated Agent: Identi Full Name	d Organization	Affiliated Committee		draising Representation	ative	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	d Organization y by name, addre	Affiliated Committee		draising Representation	ative	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 40 of 146

	CITY A	FEC FEC FUNDAMENTAL FECTOR FEC	C ID number C ID number C ID number C ID number Representat VA STATE Assising Represe	C C C C C C C C C C C C C C C C C C C	3
Name of Any Connected Organization, Affiliated ConcRAMER VICTORY FUND Mailing Address PO BOX 26141 ALEXANDRIA Relationship: Connected Organization Affiliated of Connected Organization Affiliated of Connected Organization Posignated Agent: Identify by name, address (phone or Full Name	CITY A	FEC FEC Fundraising	C ID number C ID number Representat VA STATE	C C ive, or Lead	3
Name of Any Connected Organization, Affiliated ConcRAMER VICTORY FUND Mailing Address PO BOX 26141 ALEXANDRIA Relationship: Connected Organization Affiliated of Connected Organization Affiliated of Connected Organization Posignated Agent: Identify by name, address (phone or Full Name	CITY A	Fundraising Joint Fundra	Representat VA STATE	ive, or Lead	3
Name of Any Connected Organization, Affiliated ConcRAMER VICTORY FUND Mailing Address PO BOX 26141 ALEXANDRIA Relationship: Connected Organization Affiliated of Connected Organization Affiliated of Connected Organization Posignated Agent: Identify by name, address (phone or Full Name	CITY A	Fundraising Joint Fundra	Representat	ive, or Lead	3
Name of Any Connected Organization, Affiliated ConCRAMER VICTORY FUND Mailing Address PO BOX 26141 ALEXANDRIA Relationship: Connected Organization Affiliated of Connected Organization Affiliated of Connected Organization Posignated Agent: Identify by name, address (phone or Full Name	CITY A	Joint Fundra	VA STATE	2231	3
CRAMER VICTORY FUND Mailing Address PO BOX 26141 ALEXANDRIA ALEXANDRIA Connected Organization Affiliated of the control	CITY A	Joint Fundra	VA STATE	2231	3
Mailing Address PO BOX 26141 ALEXANDRIA Relationship: Connected Organization Affiliated of the control of	ed Committee		STATE A		
ALEXANDRIA ALEXANDRIA Connected Organization Affiliated Connected Agent: Identify by name, address (phone reference)	ed Committee		STATE A		
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ALEXANDRIA Relationship: Cir Connected Organization Affiliated of the content o	ed Committee		STATE A		
Relationship: CIT Connected Organization Affiliated Connected Agent: Identify by name, address (phone refull Name	ed Committee		STATE A		
Relationship: CIT Connected Organization Affiliated Connected Agent: Identify by name, address (phone refull Name	ed Committee		STATE A		
Connected Organization Affiliated Designated Agent: Identify by name, address (phone r	ed Committee				
Designated Agent: Identify by name, address (phone r			aising Represe		ZIP CODE ▲
Mailing Address					
l l					
TITLE OR POSITION ▼	ITY A		STATE ▲		ZIP CODE ▲
		Telephon	e Number		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 41 of 146

h). Joint Fundraisi n	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Chris Stewart Fre	edom Fund		
	l 610 S. BOULEVARD		
Mailing Address			
	TAMPA	FL	33606
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	Leadership PAC Sp
Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
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Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition and the composition of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which aintains funds. Df Santa Clarita	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositors and the compository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Teleprises: List all banks or other depositories in which aintains funds. Df Santa Clarita	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraising	Particinant		
1.	,	FEC ID number	C
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3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected (Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. Box 30844		
	Bethesda		20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	- - - - - - - - - - - - - - - - - - -	ative Leadership PAC Spons
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	1	ephone Number	
safety deposit boxes or mai	les: List all banks or other depositories in which the ntains funds. F North Georgia	ne committee deposit	s funds, holds accounts, rents
Mailing Address	8025 Westside Parkway		
	Alpharetta	GA	30009
	CITY ▲	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM DUNCAN			
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
rielationship.			
Connected		t Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
Connecter connec	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Join Join by by name, address (phone number – optional)		
Connected esignated Agent: Identify Full Name	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY		
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esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition and the property of the position and	Affiliated Committee y by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing and the same of Bank, Bank of Bank, Bank, Bank of Bank, Bank, Bank, Bank of Bank, Ban	Affiliated Committee y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposition and the property of the position and	Affiliated Committee y by name, address (phone number – optional) CITY CITY To ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
	VIII TWAN VICTO			
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA	VA VA	22313
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Suntru	CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

) or (h). Joint Fundraising	ı Participant:		
1.	, . 	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected (Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115 ALEXANDRIA	, , VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION		SIAIL	ZIF GODE A
	Tel	lephone Number	
safety deposit boxes or mai	ies: List all banks or other depositories in which the ntains funds.	he committee deposit	s funds, holds accounts, rents
Mailing Address	1900 E Ninth Street		
g			
	Cleveland	OH	44114
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi	ng Participant		
1.	.g . u	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA		22313
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Spons
Designated Agent: Identi	iv by name, address (phone number – entional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or meaning the safety deposit boxes or meaning	CITY CITY Tele Pries: List all banks or other depositories in which the aintains funds. S National Bank 1800 Robert Fulton Drive	STATE ▲	
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the position of Bank, Depository, etc.	CITY CITY Tele Pries: List all banks or other depositories in which the aintains funds. S National Bank 1800 Robert Fulton Drive Suite 310	STATE A ephone Number ne committee deposits	s funds, holds accounts, rents
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or make the position of Bank, Depository, etc.	CITY CITY Tele Pries: List all banks or other depositories in which the aintains funds. S National Bank 1800 Robert Fulton Drive	STATE ▲	

FEC Form 1S (Revised 02/2017)

g) or (h).	Joint Fundraising	g Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.	 		FEC ID number	С
4.			FEC ID number	С
		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
N	Mailing Address	228 S. WASHINGTON STREET SUITE 115		
		ALEXANDRIA	VA	22314
F	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	nated Agent: Identify	by name, address (phone number – optional)		
Full		by name, address (phone number – optional)		
Full	II Name	by name, address (phone number – optional)		
Full	II Name	by name, address (phone number – optional)		
Full Ma	II Name	CITY	STATE A	ZIP CODE A
Full Ma	Il Name	CITY A		
Banks safety of Deposit	II Nameilling Address ITLE OR POSITION or Other Depositor deposit boxes or ma	CITY CITY Tele ies: List all banks or other depositories in which the intains funds. f America 31531 Santa Margarita Parkway	STATE A ephone Number he committee deposit	ZIP CODE s funds, holds accounts, rents
Banks safety of Deposit	Il Nameilling Address ITLE OR POSITION or Other Depositor deposit boxes or ma of Bank, Bank of itory, etc.	CITY CITY Tele ies: List all banks or other depositories in which the intains funds. f America	STATE ▲ ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisir	ig i artiolpariti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	raising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	IN IN	47280
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mailing and maili	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, Commepository, etc.	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. nunity Bank of Mississippi	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 49 of 146

or(h). Joint Fundraisi n	g Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
LAM CURTIS JO	DINT FUNDRAISING COMMITTEE		
Mailing Address	370 EAST SOUTH TEMPLE		
	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	_ CITY ▲	STATE A	ZIP CODE A
L	I	lephone Number	
safety deposit boxes or ma	ries: List all banks or other depositories in which aintains funds. Sapital Bank of Texas 310 West Wall Street Suite 100	the committee deposits	s funds, holds accounts, rents
	_I Midland	TX	79701

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4.			
	I Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
KIM VICTORY F	UND		
Mailing Address	9460 TEGNER ROAD		
	HILMAR	CA	95324
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi		Fundraising Representa	ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi		
Connecte Designated Agent: Identi Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi		
Connecte Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Figure 1	STATE A	ZIP CODE A
Connected Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee Affiliated Committee To pries: List all banks or other depositories in which paintains funds. Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Banks or Other Depositors safety deposit boxes or matching Address	aintains funds.			KY KY	40509	
safety deposit boxes or ma Name of Bank, Depository, etc.	aintains funds. Bank			Intee deposit		olds accounts, rents
safety deposit boxes or ma Name of Bank, Depository, etc.	aintains funds. Bank			Intee deposit		olds accounts, rents
safety deposit boxes or ma	aintains funds.	s or other depositories in		Intee deposit		olds accounts, rents
		s or other depositories in	which the com	miliee deposi	,	olds accounts, rents
Ranke or Other Denseite	rice List all bank	e or other depositories in			อ เนเเนรี. []	
			which the com-	mittae danssit	e funda h	
			Telephone	Number		
TITLE OR POSITION	•	CITY ▲		STATE ▲		ZIP CODE ▲
Mailing Address						
Full Name						
Designated Agent: Identify	by name, addre	ss (phone number – opti	onal)			
Connected	d Organization	Affiliated Committee	✗ Joint Fundrais	ing Represent	ative	Leadership PAC Spo
Relationship:		CITY A		STATE ▲		ZIP CODE ▲
	MASON			MI	4885	54
Mailing Address						
	₁ 2870 DOBIE R	ROAD				
1				1 1 1 1		
Name of Any Connected WALBERG WINN	_		t Fundraising R	epresentativ	e, or Lead	lership PAC Spons
4.			FEC	ID number	C .	
3.				ID number	C	
_				ID number	C	
2.				ID number	C	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	332 W. LEE HIGHWAY		
		#303		
		WARRENTON	VA	20186
	Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
	Connected	d Organization	Fundraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			1 . 1 . 1	<u> </u>
		CITY ▲	STATE A	
	TITLE OR POSITION	•	1	ZIP CODE A
	TITLE OR POSITION	•	STATE A	ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds. rgan Chase Bank, NA	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which taintains funds.	ephone Number	
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which taintains funds. rgan Chase Bank, NA	ephone Number	
9.	Banks or Other Depositors safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which taintains funds. rgan Chase Bank, NA	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
=	Organization, Affiliated Committe	e, Joint Fundra	sing Representativ	e, or Leadership PAC Spons
MILLER VICTOR	Y FUND			
	228 S. WASHINGTON STREET			
Mailing Address				
	SUITE 115			
			ı VA ı	22314
	ALEXANDRIA			
	CITY ▲ I Organization Affiliated Commit		STATE A	
Connected	CITY ▲			
Connected esignated Agent: Identify	CITY ▲ I Organization Affiliated Commit			
Connected esignated Agent: Identify Full Name	CITY ▲ I Organization Affiliated Commit			
Connected esignated Agent: Identify Full Name	CITY Affiliated Commit by name, address (phone number			tative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	CITY A Organization Affiliated Commit by name, address (phone number			
Connected esignated Agent: Identify Full Name	CITY A Organization Affiliated Commit by name, address (phone number	- optional)	Fundraising Represen	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

	sing Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
WATKINS VICT	ORY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	, MD I	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Represent	
esignated Agent: Iden	tify by name, address (phone number – optional)	<u> </u>	
Pesignated Agent: Iden			
Designated Agent: Iden			
Pesignated Agent: Iden			
Pesignated Agent: Iden	tify by name, address (phone number – optional)		
Pesignated Agent: Iden	tify by name, address (phone number – optional)	STATE A	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
DAN CRENSHAY	W VICTORY COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, Fifth	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Fifth	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which haintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the proposition of the propo	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which haintains funds. Third Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the proposition of the propo	fy by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which haintains funds. Third Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). Joint Fundraisi	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representati	ve, or Leadership PAC Sponsor
Mailing Address	12176 CHANCERY STATION CIR		
	RESTON	, , VA ,	, 20190
Relationship:			
	CITY ▲	STATE A	_
Connecte	d Organization Affiliated Committee	Joint Fundraising Represer	ntative Leadership PAC Spon
Designated Agent: Identif	y by name, address (phone number – option		
Mailing Address			
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositor safety deposit boxes or m		which the committee depos	sits funds, holds accounts, rents
Depository, etc.			
Mailing Address	1200 F Street NW		
	Washington	DC	20004

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	С
4		FEC ID number	С
lame of Any Connected	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	120 N CONGRES ST STE 300		
	JACKSON	MS	39201
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Affiliated Committee Y Joint Ty by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Affiliated Committee Figure 1. Joint 1. Joint 2. Joi		Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Affiliated Committee Y Joint Ty by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Figure 1	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee Affiliated Committee Fy Joint To pries: List all banks or other depositories in which naintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	uising Representative	e, or Leadership PAC Sponsor
TEAM CHENEY			
Mailing Address	3538 SOUTH WAKEFIELD ST.		
	ARLINGTON	VA	22206
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joint In the Joint In	Fundraising Representa	Leadership PAC Spons
Designated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Spons
Designated Agent: Identify		Fundraising Representa	Leadership PAC Spons
Designated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Spons
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sponso
Designated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
Designated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY	STATE A	
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (phone number – optional) CITY Tele ries: List all banks or other depositories in which the	STATE A ephone Number	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or mail	by name, address (phone number – optional) CITY Tele ries: List all banks or other depositories in which the	STATE A ephone Number	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mailing Name of Bank, First Signal First Signal Process of Sig	cies: List all banks or other depositories in which thintains funds.	STATE A ephone Number	ZIP CODE A
Pull Name	cies: List all banks or other depositories in which the intains funds.	STATE A ephone Number	ZIP CODE A
Pull Name	cies: List all banks or other depositories in which the intains funds.	STATE A ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1			
2.		FEC ID number	C
		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	С
4.			
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
GREG STEUBE \	/ICTORY FUND		
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#407		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE A	ZIP CODE A
		nt Fundraising Representa	
Full Name			
Mailing Address			
		OTATE :	
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE ▲ Telephone Number	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisin		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
LATTA VICTORY			
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY A	STATE A	ZIP CODE A
•			
	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, Empire	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, Empire	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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Page 61 of 146

1.			
		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
7.			
lame of Any Connected	Organization, Affiliated Committee, Joint I	Fundraising Representati	ive, or Leadership PAC Spon
GONZALEZ VICT	FORY FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	ı OH	43017
Relationship:	CITY A		
Helationship.		STATE A Joint Fundraising Represe	
esignated Agent: Identif	y by name, address (phone number – option	al)	
	y by name, address (phone number – option	al)	
Full Name	y by name, address (phone number – option	al)	
Full Name		al)	
Full Name	CITY A		ZIP CODE A
Full Name	CITY A	al) STATE Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisir	9		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SERVANT LEAD	ERSHIP FUND		
	824 S MILLEDGE AVE STE 101		
Mailing Address	1024 3 MILLEDGE AVE 312 101		
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	y by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, Atlanti	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. C Union Bank	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make the property of the position of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY Te pries: List all banks or other depositories in which aintains funds. C Union Bank 1800 Robert Fulton Drive	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
BUCKEYE VICTO	ORY FUND		
	499 SOUTH CAPITOL STREET SW		
Mailing Address			
	407		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii	by by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional) CITY		
esignated Agent: Identif	by by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or meaning and	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	cy by name, address (phone number – optional) CITY CITY Pries: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundrais	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	C
ame of Any Connecte	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
NDSTRONG			
Mailing Address	1515 BURNT BOAT DR NUM 112		
	BISMARCK	ND ND	58503
Relationship:	CITY A	STATE A	ZIP CODE ▲
		d Foundation Bosses	ative Leadership PAC S
		nt Fundraising Representa	Leadership PAC S
	ify by name, address (phone number – optional)	it Fundraising Represent	Leadership PAC S
esignated Agent: Ident		t Fundraising Represent	Leadership PAC S
esignated Agent: Ident		t Fundraising Represent	Leadership PAC S
esignated Agent: Ident		Trundraising Hepresenta	Leadership PAC S
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE	
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional) Line City ▲		
Full Name Mailing Address TITLE OR POSITIO anks or Other Depositety deposit boxes or reference and the second content of the seco	ify by name, address (phone number – optional) CITY ▲ Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO anks or Other Depositety deposit boxes or reame of Bank,	ify by name, address (phone number – optional) CITY ▲ Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO anks or Other Depositety deposit boxes or reame of Bank,	ify by name, address (phone number – optional) CITY ▲ Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO anks or Other Depositifety deposit boxes or reame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY ▲ Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITIO anks or Other Depositifety deposit boxes or reame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY ▲ Cories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			FEC ID) number	C
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	С
=	_	ed Committee, Joint F	undraising Rep	resentativ	ve, or Leadership PAC Spons
JOHN ROSE VIC	TORY FUND				
Mailing Address	PO BOX 2404				
				TN	38502
	COOKEVILLE				
	I Organization Af		Joint Fundraising	STATE A	
Connected	I Organization Af	filiated Committee			
Connected esignated Agent: Identify	I Organization Af	filiated Committee			
esignated Agent: Identify Full Name	I Organization Af	filiated Committee			
esignated Agent: Identify Full Name	d Organization Af	filiated Committee			Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Af	phone number – optiona	i)	g Represent	Leadership PAC Sp
esignated Agent: Identify Full Name	d Organization Af	filiated Committee	i)	Represent	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

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1.		FEC ID number	С
3.			
3.		FEC ID number	C
		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spons
HRW VICTORY F	UND		
I			
Mailing Address	824 S MILLEDGE AVE STE 101		
			1 1 1 1 1 1 1 1 1
	ATHENS	GA	30605
		STATE ▲ Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Spo
Connected			
Connected esignated Agent: Identify	d Organization Affiliated Committee		
esignated Agent: Identify Full Name	d Organization Affiliated Committee		
esignated Agent: Identify Full Name	Affiliated Committee		Leadership PAC Spo
esignated Agent: Identify Full Name Mailing Address	Affiliated Committee		
esignated Agent: Identify Full Name	Affiliated Committee	Fundraising Representa	Leadership PAC Spo

FEC Form 1S (Revised 02/2017)

or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
L L L L L L L) 		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Spons
Designated Agent: Identi	Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Spons
Designated Agent: Identi		Fundraising Representa	Leadership PAC Spons
Designated Agent: Identi		Fundraising Representa	Leadership PAC Spons
Designated Agent: Identi Full Name L Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Spons
Designated Agent: Identi	by by name, address (phone number – optional) CITY CITY		
Designated Agent: Identi Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY Tel pries: List all banks or other depositories in which t	STATE lephone Number	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many Name of Bank,	y by name, address (phone number – optional) CITY CITY Tel pries: List all banks or other depositories in which t	STATE lephone Number	ZIP CODE A
Designated Agent: Identify Full Name	y by name, address (phone number – optional) CITY CITY Tel pries: List all banks or other depositories in which t	STATE lephone Number	ZIP CODE A
Designated Agent: Identify Full Name	y by name, address (phone number – optional) CITY CITY Tel pries: List all banks or other depositories in which t	STATE lephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
. Name of Any Connected WESTERMAN V	d Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 21097		
	HOT SPRINGS	ı ı AR ı	71903
Relationship:	CITY A	STATE A	ZIP CODE ▲
		Fundraising Representa	
Pull Name Mailing Address	fy by name, address (phone number – optional)		
TITLE OR POSITION	N ▼	STATE ▲	ZIP CODE ▲
		ephone Number	
Banks or Other Deposite safety deposit boxes or management Name of Bank, Depository, etc.	ories: List all banks or other depositories in which the naintains funds.	he committee deposit	s funds, holds accounts, rents
Mailing Address			
3			

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc. Mailing Address	▼ ries: List all ban	CITY A hks or other depositories in	Telephone		ZIP CODE ZIP CODE ts funds, holds accounts, rents
Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or main ame of Bank, epository, etc.	▼ ries: List all ban	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintain and of Bank,	▼ ries: List all ban	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor	▼ ries: List all ban	CITY A	Telephone	Number _	ZIP CODE A
Mailing Address					
Mailing Address					
Mailing Address				STATE A	
Full Name					
esignated Agent: Identify	y by name, addr	ress (phone number – opti	onal)		
Connected	d Organization	Affiliated Committee	X Joint Fundraisi	ng Represent	ative Leadership PAC Sp
Relationship:		CITY A		STATE A	ZIP CODE ▲
	ATHENS			GA	30605
Mailing Address	824 S MILLE	DGE AVE, STE 101			
<u> </u>					
ame of Any Connected	Organization, A	Affiliated Committee, Join	t Fundraising R	epresentativ	e, or Leadership PAC Spons
4.				ID HUITIDEI	<u> </u>
1				ID number	C
3.			FEC	ID number	C
3.			1 1	II) numbar	C
1			FEC FEC	ID number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng rantopant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MEUSER VICTO	RY FUND		
	<u> </u>		
	1 499 SOUTH CAPITOL STREET SW		
Mailing Address	#405		
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite of the deposite boxes or market depos	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1. FEC ID number C 2. FEC ID number C 3. FEC ID number C 4. FEC ID number C	onsor
3. FEC ID number C 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spr	onsor
A. FEC ID number C Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Special Committee (C) and the committee (C) an	onsor
4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sports	onsor
	onsor
Mailing Address 1900 PRESTON ROAD	
#267 - PMB 229	
PLANO TX 75093	
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲	
Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC	Sponsor
B. Designated Agent: Identify by name, address (phone number – optional) Full Name	
Mailing Address	
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resafety deposit boxes or maintains funds. Name of Bank, Depository, etc.	∍nts
Mailing Address	
CITY ▲ STATE ▲ ZIP CODE ▲	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i	ng Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
DAN BISHOP VI	CTORY COMMITTEE		
	10809 GRASSY CREEK PL		
Mailing Address	10009 GRASSI CREEK FE		
	RALEIGH	NC NC	27614
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC S
Connecte con	ed Organization Affiliated Committee Joint	int Fundraising Represent	ative Leadership PAC S
Connecte con		int Fundraising Represent	ative Leadership PAC S
Connecte		int Fundraising Represent	ative Leadership PAC S
Connecte con		int Fundraising Represent	ative Leadership PAC S
Connecte con	ify by name, address (phone number – optional)		
Connecte con	ify by name, address (phone number – optional)	int Fundraising Represent	
Connecte con	ify by name, address (phone number – optional)		
Connecte con	ify by name, address (phone number – optional)	STATE A	
Esignated Agent: Identification of the connection of the connectio	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of the comment of t	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of the composition	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of Position of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
TEAM HUIZENG	A 		
	PO BOX 2485		
Mailing Address			
	SPRINGFIELD	VA	22152
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represent	tative Leadership PAC Sp
	Affiliated Committee X Joy		tative Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii Full Name	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	C
6.	Name of Any Connected TAKE BACK THE	Organization, Affiliated Committee, Joint Fundrais HOUSE 2020	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint Fo	undraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE ▲	
	Banks or Other Depositor	Tele	STATE ▲	
	Banks or Other Depositor safety deposit boxes or ma	Tele	STATE ▲	
	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tele	STATE ▲	
	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	Tele	STATE ▲	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais ii	ng Participant:			
1.		FEC I	D number	C
2.		FEC I	D number	C
3.		FEC I	D number	C
4.		FEC I	D number	C
	Organization, Affiliated Committee, Joint	Fundraising Re	presentat	ive, or Leadership PAC Spo
FRIENDS OF BU	RCHETT			
			1 1 1	
	_I 95 WHITE BRIDGE RD			
Mailing Address				
	SUITE 207			
	NASHVILLE		TN	37205
Relationship:	CITY ▲		STATE A	▲ ZIP CODE ▲
Connecte		Joint Fundraisin	ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif	Affiliated Committee		ng Represe	ntative Leadership PAC
Connecte			ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif			ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif	y by name, address (phone number – optio			
esignated Agent: Identification	by by name, address (phone number – option		ng Represe	
esignated Agent: Identification Full Name Mailing Address	by by name, address (phone number – option		STATE A	
esignated Agent: Identification Full Name Mailing Address	by by name, address (phone number – option	nai)	STATE A	
esignated Agent: Identification of the compact of t	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the content of t	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	y by name, address (phone number – option CITY ▲ CITY ▲ Pries: List all banks or other depositories in	nal) Telephone I	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	g Participant:				
1.			FE	C ID number	С
2.			FE	C ID number	С
3.			FE	C ID number	С
4.			FE	EC ID number	С
		committee, Joint	Fundraising	Representativ	ve, or Leadership PAC Spor
KELLER VICTOR	Y COMMITTEE				
	4031 THICKET LANE				
Mailing Address					
	HARRISBURG			PA	
Relationship:	(CITY A		STATE A	ZIP CODE ▲
	Organization Affiliate			aising Represen	tative Leadership PAC S
esignated Agent: Identify				aising Represen	tative Leadership PAC S
esignated Agent: Identify				aising Represen	tative Leadership PAC S
esignated Agent: Identify				aising Represen	
esignated Agent: Identify	by name, address (phone	e number – option	nal)		
esignated Agent: Identify	by name, address (phone	e number – option	nal)		
esignated Agent: Identify Full Name	by name, address (phone	e number – option	nal)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone	e number – option	nal)	STATE A	
Full Name	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor of the deposit boxes or maintenance in the control of t	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or ma	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or material depositions are of Bank, epository, etc.	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor aftety deposit boxes or material depositions are of Bank, epository, etc.	by name, address (phone of the control of the contr	e number – option	nal)	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) o	r(h). Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	JUDGE CARTER V	VICTORY FUND		
	Mailing Address	22780 INDIAN CREEK DR.		
		SUITE 100		
		DULLES	VA VA	20166
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
- 9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
- 9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositori safety deposit boxes or main	CITY CITY Tele es: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ASHLEY HINSOI	N VICTORY COMMITTEE		
I			
Mailing Address	P.O. BOX 341027		
	AUSTIN	TX	78734
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identif	fy by name, address (phone number – optional) CITY		
esignated Agent: Identif	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION AREA OF Other Depositor Afety deposit boxes or mailing and ma	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WIN IN 2020			
	<u> </u>		
	1 320 FIRST STREET SOUTHEAST		
Mailing Address			
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional) CITY To	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
THE VALADAO	VICTORY FUND		
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA CA	93704
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of the control of the	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	9		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
TAKE BACK THI	E HOUSE CALIFORNIA 2020		
	P.O. BOX 30844		
Mailing Address			
	PETUEDA	MD	20024
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	ative Leadership PAC S
	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or markets.	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1 1 1 1					
			FEC I	D number	С
			FEC I	D number	С
			FEC I	D number	С
			FEC I	D number	С
	_		Fundraising Re	presentativ	ve, or Leadership PAC Spor
ddress	P.O. BOX 30844				
	BETHESDA	<u> </u>		MD	20824
nip:		CITY A		STATE A	ZIP CODE A
ress					
		OIT) (
POSITION ▼	7	CITY A		STATE ▲	ZIP CODE ▲
d	ck THE h	P.O. BOX 30844 BETHESDA iip: Connected Organization ent: Identify by name, address	P.O. BOX 30844 BETHESDA ip: CITY Connected Organization Affiliated Committee	Connected Organization, Affiliated Committee, Joint Fundraising Record TEXAS 2020 Joint Fundraising Record	BETHESDA BETHESDA MD STATE Connected Organization Affiliated Committee Joint Fundraising Representent: Identify by name, address (phone number – optional)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number CITY A STATE A ZIP CODE A Telephone Number Title OR POSITION Title OR POSITION Affiliated Committee in which the committee deposite funds, holds accounts, relately deposit boxes or maintains funds. Name of Bank, Depositories: List all banks or other depositories in which the committee deposite funds, holds accounts, relately deposit boxes or maintains funds. Mailing Address Mailing Address Mailing Address Mailing Address	*	,,,,,,,,,,,,,,,,,,,, ,	FEC ID number	C
3.	2		FEC ID number	C
4. FEC ID number C ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spr. LONG TEAM Mailing Address			FEC ID number	
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spt LONG TEAM Mailing Address P.O. BOX 3864 SPRINGFIELD Affiliated Committee STATE A ZIP CODE A Tolephone Number TITLE OR POSITION CITY A STATE A ZIP CODE A Telephone Number Telephone Number Telephone Number Telephone Number Telephone Stanks, holds accounts, realery depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, realery deposit boxes or maintains funds.			FEC ID number	
Mailing Address P.O. BOX 3864 SPRINGFIELD SPRINGFIELD Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number — Title OR POSITION ▼ Telephone Number — Title OR Positories: List all banks or other depositories in which the committee deposits funds, holds accounts, relately deposit boxes or maintains funds. ame of Bank, epository, etc.	4.			
Mailing Address P.O. BOX 3864 SPRINGFIELD STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number		Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	LONG TEAM			
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number				
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number Telephone Number	Mailing Address	P.O. BOX 3864		
Relationship: CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY STATE ZIP CODE Telephone Number Telephone Number Telephone Number Telephone Number Telephone Starte Telephone Number Telephone Nu	Mailing Address			
Relationship: CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address TITLE OR POSITION CITY STATE ZIP CODE Telephone Number Telephone Number Telephone Number Telephone Number Telephone Starte Telephone Number Telephone N		SPRINGFIELD	ı MOı	65808
Connected Organization	Relationship:			
esignated Agent: Identify by name, address (phone number – optional) Full Name Mailing Address CITY A STATE A ZIP CODE A Telephone Number — — — — — — — — — — — — — — — — — — —				
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲ Telephone Number	Full Name			
Telephone Number	Mailina Aalalusaa			
Telephone Number	Mailing Address			
Telephone Number	Mailing Address			
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, reafety deposit boxes or maintains funds. ame of Bank, epository, etc.	Mailing Address			
afety deposit boxes or maintains funds. ame of Bank, epository, etc.		CITY A	STATE A	ZIP CODE A
afety deposit boxes or maintains funds. ame of Bank, epository, etc.		•	1	ZIP CODE A
epository, etc.	TITLE OR POSITION		Telephone Number	
Mailing Address	TITLE OR POSITION	ries: List all banks or other depositories in which	Telephone Number	
	TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in which	Telephone Number	
	anks or Other Depositor detay deposit boxes or material deposit boxes or material depository, etc.	ries: List all banks or other depositories in which	Telephone Number	
	anks or Other Depositor detay deposit boxes or material deposit boxes or material depository, etc.	ries: List all banks or other depositories in which	Telephone Number	

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(h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
AUSTIN SCOTT	VICTORY FUND		
	1 824 S. MILLEDGE AVENUE		
Mailing Address			
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identi	Affiliated Committee Jointy Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Pesignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
Designated Agent: Identi Full Name L Mailing Address	fy by name, address (phone number – optional) CITY		
Pesignated Agent: Identi Full Name _ _ Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY City	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	fy by name, address (phone number – optional) CITY City	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	1	EEO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MAJORITY RISI	\G		
Mailing Address	P.O. BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ng Participant:			
1.		FEC	D number	С
2.		FEC	D number	С
3.		FEC	D number	С
4.		FEC	D number	С
ame of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Re	epresentativ	e, or Leadership PAC Spon
L L L L L L L L				
Mailing Address	PO BOX 97275			
	RALEIGH		NC	27624
Relationship:	CITY A		STATE A	ZIP CODE ▲
	d Organization Affiliated Committee Ty by name, address (phone number – opi	Joint Fundraisi	ng Represent	ative Leadership PAC S
esignated Agent: Identi	_		ng Represent	ative Leadership PAC S
esignated Agent: Identi	_		ng Represent	ative Leadership PAC S
esignated Agent: Identi	_		ng Represent	ative Leadership PAC S
esignated Agent: Identi	_	tional)	ng Represent	ative Leadership PAC S
esignated Agent: Identi	by by name, address (phone number – opi	tional)		
esignated Agent: Identing Full Name	by by name, address (phone number – opi	tional)	STATE A	
Full Name Mailing Address	cy by name, address (phone number – opi	tional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – opi	tional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	cy by name, address (phone number – opi	tional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – opi	tional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – opi	tional) Telephone	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:			
1.		FEC ID	number	C
2.		FEC ID	number	C
3		FEC ID	number	C
4		FEC ID	number	C
	Organization, Affiliated Committee, J	oint Fundraising Rep	resentative	e, or Leadership PAC Sponsor
HUDSON VICTO	K			
Mailing Address	824 S. MILLEDGE AVE			
	SUITE 101			
	ATHENS		GA	30605
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	X Joint Fundraising	Representa	Leadership PAC Spons
	_			
Designated Agent: Identif	y by name, address (phone number – o			
Designated Agent: Identif	_			
Designated Agent: Identif	_			
Designated Agent: Identification Full Name Mailing Address	y by name, address (phone number – o	optional)	STATE A	ZIP CODE A
Designated Agent: Identif	y by name, address (phone number – o	optional)	STATE A	ZIP CODE A
Designated Agent: Identification Full Name	y by name, address (phone number – of the control o	optional) Telephone Nu	STATE ▲ umber	
Designated Agent: Identification Full Name	y by name, address (phone number – of the control o	optional) Telephone Nu	STATE ▲ umber	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin	3		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spon
TEAM BUDDY			
	824 S. MILLEDGE AVE		
Mailing Address	SUITE 101		
		CA	20605
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		int Fundraising Represent	ative Leadership PAC S
Connected	d Organization Affiliated Committee Joint	int Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify		int Fundraising Represent	Leadership PAC S
Connected esignated Agent: Identify Full Name		int Fundraising Represent	Leadership PAC S
Connected esignated Agent: Identify Full Name		int Fundraising Represent	Leadership PAC S
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition of Bank, epository, etc.	y by name, address (phone number – optional) CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
NORTH TO THE	FUTURE		
Mailing Address	PO BOX 2814		
	SEWARD	AK	99664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Join	nt Fundraising Representa	Leadership PAC Sp
	ed Organization Affiliated Committee Join	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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5(g) c	or(h). Joint Fundraisin ç	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	1661 AARON BRENNER DR		
		SUITE 300 MEMPHIS	, , TN ,	38120
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			undraising Represent	
8.		by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
9.	safety deposit boxes or mai	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	safety deposit boxes or mai	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents

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Banks or Other Depositors of Bank, Depository, etc. Mailing Address		or other depositories in w	*		ds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		or other depositories in w	*		ds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.		or other depositories in w	*		ds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or m		or other depositories in w	*		ds, holds accounts, rents
Banks or Other Deposito		or other depositories in w	*		ds, holds accounts, rents
			*		
TITLE OR POSITION			relephone realin		
TITLE OR POSITION			Telephone Numl	ner	I_I I_I
	I ▼	CITY A		L TE ▲	ZIP CODE ▲
				. 1 1	
Mailing Address					
Full Name	y by name, addres	s (phone number – optiona	ai)	1 1 1 1	
			-		
	d Organization		Joint Fundraising Re		Leadership PAC Spo
Relationship:	JUNE	CITY A	δ.	TATE A	ZIP CODE A
	SOUTH SALEM			NY ı	10590
Mailing Address	PO BOX 68				
	DC DC): ==				
Name of Any Connected		liated Committee, Joint F	undraising Repres	entative, or I	Leadership PAC Sponse
4.			FEC ID no	umber C	
1			FEC ID no		
3.			FEC ID no		
2			_	umber C	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin ç	յ Participant։		
	1		FEC ID number	C
	2.		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected WIN THE FUTUR	Organization, Affiliated Committee, Joint Fundi	raising Representativ	ve, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485		
		SPRINGFIELD	VA VA	22152
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	t Fundraising Represen	tative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number - optional)		
	Mailing Address			
		CITY	CTATE A	
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Te	elephone Number	
9.	Banks or Other Depositor safety deposit boxes or matching Name of Bank, Depository, etc.	ies: List all banks or other depositories in which intains funds.	the committee depos	its funds, holds accounts, rents
	Mailing Address			
	Č			
			, , ,	
		CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Full Name Mailing Address TITLE OR POSITION	▼ ories: List all bank	CITY A	Telephone Nu		ZIP CODE A s funds, holds accounts, rents
Full Name			S		
Full Name				STATE A	
Full Name					
Full Name					
Full Name					
esignated Agent: identily					
		ess (phone number – optiona		портозопи	Leadership 1 AO Sp
	d Organization		Joint Fundraising		
Relationship:		CITY A		STATE A	ZIP CODE A
	BEVERLY			ı MA ı	, 01915
Mailing Address		STREET 2ND FLOOR			
	ı C/O RED CUE	RVE SOLUTIONS			
ame of Any Connected	_	ffiliated Committee, Joint F	undraising Rep	resentative	e, or Leadership PAC Spons
4					0
3.			_	number	C
			_	number	C
2.			_ _ FEC.ID	number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	▼ bries: List all banks	s or other depositories in which	Telephone Number	its funds, holds accounts, rents
anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	▼ bries: List all banks	or other depositories in which		its funds, holds accounts, rents
anks or Other Deposito afety deposit boxes or ma	▼ bries: List all banks	s or other depositories in which		its funds, holds accounts, rents
anks or Other Deposito	▼ bries: List all banks	or other depositories in which		its funds, holds accounts, rents
	▼			
TITLE OR POSITION			Telephone Number	
TITLE OR POSITION				
		CITY A	STATE ▲	ZIP CODE ▲
	1			
Mailing Address				
Full Name				
		s (phone number – optional)		
Connected	d Organization		oint Fundraising Represen	
Relationship:		CITY A	STATE A	ZIP CODE A
	BETHESDA			20824
ivialility Address				
Mailing Address	PO BOX 30844			
BANKS VICTOR		liated Committee, Joint Fur	ndraising Representati	ve, or Leadership PAC Spons
4.			FEC ID number	С
J			FEC ID number	С
3.			FEC ID number	С
1			FEC ID number	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
KIM VICTORY FU	JND 		
Mailing Address	9460 TEGNER ROAD		
walling Address			
	HILMAR	, CA	1 95324
Relationship:	CITY A	STATE A	ZIP CODE A
i ibiationionip.	OH I	SIAIL =	ZIF OODL =
	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Spon
		Fundraising Represent	ative Leadership PAC Spon:
Designated Agent: Identify Full Name		Fundraising Represent	ative Leadership PAC Spons
Designated Agent: Identify Full Name			ative Leadership PAC Spons
Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
Designated Agent: Identify Full Name L Mailing Address	y by name, address (phone number – optional) CITY		
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	y by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Designated Agent: Identify Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors safety deposit boxes or mail Name of Bank,	y by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	y by name, address (phone number – optional) CITY Te pries: List all banks or other depositories in which the	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraising	a Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	JACOBS VICTOR			
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA I	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•	1	3022 _
		Te	elephone Number	
0	B. J. Oll. B. D. J.			
9.		المامانين منا ممانيمة وممام بيماهم بيما مراسمها الماهمان المهما	41	. f de le le le le en en en entre
	safety deposit boxes or ma	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank,	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ies: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative,	or Leadership PAC Sponsor
	PARNELL VICTO	RY COMMITTEE		
	Mailing Address	PO BOX 1488		
		1		
		CRANBERRY TOWNSHIP	l PA	16066
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	I Organization Affiliated Committee X Joint	Fundraising Representative	
	Connected	Allillated Committee Joint	rundraising Representative	ve Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Pull Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE ▲	
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION	CITY CITY Te	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Te ries: List all banks or other depositories in which intains funds.	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY CITY Te ries: List all banks or other depositories in which intains funds.	STATE ▲ slephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds.	STATE ▲ slephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY CITY Te ries: List all banks or other depositories in which intains funds.	STATE ▲ slephone Number the committee deposits	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) (or(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	FORT VICTORY F	FUND		
		」332 W LEE HWY		
	Mailing Address			
		#303		
		WARRENTON	VA	20186
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8.	Full Name	CITY A	STATE A	
8. 9.	Full Name	CITY CITY Te ies: List all banks or other depositories in which	STATE A	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE ▲
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY CITY Te ies: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GIMENEZ VICTO	DRY COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
BURGESS VICT	ORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	, , MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint May		
esignated Agent: Identi	Affiliated Committee Joint Joint May	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Joint Market Ma		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Joint Market Ma	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail to the control of the contr	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	Affiliated Committee Affiliated Committee Typical Spring	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 101 of 146

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. I		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	RESCHENTHALE	ER VICTORY FUND		
	Mailing Addus as	824 S MILLEDGE AVE		
	Mailing Address	SUITE 101		
		ATHENS	, GA	, 30605
	Relationship:		STATE A	
		CITY ▲		ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8. [Designated Agent: Identify	/ by name, address (phone number – optional)		
8. [y by name, address (phone number – optional)		
8. [Full Name	y by name, address (phone number – optional)		
8. [y by name, address (phone number – optional)		
- 8. [Full Name	y by name, address (phone number – optional)		
- 8. C	Full Name			
- 8. C	Full Name	CITY	STATE A	ZIP CODE A
- 8. [Full Name	CITY A	STATE A	
- 8. [Full Name	CITY A	1	
– 9. E	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦
_ 9. E	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or maintains.	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦
_ 9. E 8	Full Name Mailing Address TITLE OR POSITION	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦
_ 9. E 8	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main and the safety deposit	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦
_ 9. E s	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦
_ 9. E 8	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY CITY Tel ries: List all banks or other depositories in which ti	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
TIFFANY VICTO	RY FUND		
	PO BOX 30844		
Mailing Address	1 O BOX 30044		
	BETHESDA	MD	20824
Deletionship		STATE ▲	ZIP CODE ▲
	CITY ▲ ed Organization	t Fundraising Represent	
Connecte	ed Organization Affiliated Committee		
Connecte esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Join fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee Affiliated Committee Fy by name, address (phone number – optional) CITY	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee Affiliated Committee Typical Join Typical Street	STATE A	Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin		FEC ID number	
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HERN VICTORY	FUND		
Mailing Address	8630 S PEORIA AVE		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full NameMailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
MCMORRIS ROI	DGERS WIN THE FUTURE FUND		
Mailing Address	PO BOX 2485		
	SPRINGFIELD	, , , VA ,	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Spo
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Spo
esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
esignated Agent: Identification	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Spo
esignated Agent: Identification	Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y Joint y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee y Joint fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 105 of 146

	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spons
JEANNE VICTOR			
Mailing Address	PO BOX 30844		
g			
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) c	or(h). Joint Fundraising	y Participant:		
	1		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
		PO POV 20044		
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	indraising Representa	Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
	Full Name			
	Full Name			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•		ZIP CODE A
9.	Mailing Address TITLE OR POSITION	Telepies: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank,	Telepies: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Telepies: List all banks or other depositories in which the	STATE A	
9.	Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Telepies: List all banks or other depositories in which the	STATE A	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 107 of 146

5(g) c	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra EXAS VICTORY FUND	ising Representative	e, or Leadership PAC Sponsor
	GOLLING FOR TE			
	Mailing Address	PO BOX 30844	1 1 1 1 1 1	
		BETHESDA	MD MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY		
9.	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ies: List all banks or other depositories in which the	STATE ▲ ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.					C
			_	number	
3.			_	number	C
			FEC ID	number	C
4.			FEC ID	number	C
ame of Any Connected	Organization, Affilia	ated Committee, Joint F	undraising Rep	resentative	e, or Leadership PAC Spor
TEAM FITZ					
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
esignated Agent: Identify Full Name	by name, address ((phone number – optiona	al)		
Mailing Address					
			I	1 . 1	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
			Telephone Nu	ımber	
		or other depositories in w	hich the commit	tee deposit	s funds, holds accounts, ren
ame of Bank,					
afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	1,,,,,				
ame of Bank,					

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID numb	er C
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4.		FEC ID numb	er C
Name of Any Connected STEEL VICTORY	Organization, Affiliated Committee, Joint	Fundraising Represent	ative, or Leadership PAC Spons
OTELE VIOTORY			
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY A	STATE	ZIP CODE A
Designated Agent: Identif	y by name, address (phone number - option	nal)	
Full Name			
Full Name	<u> </u>		
Mailing Address	CITY A	STATE	ZIP CODE A
Mailing Address TITLE OR POSITION	CITY A		ZIP CODE A
Mailing Address TITLE OR POSITION	V	STATE Telephone Number	
Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in	STATE Telephone Number	
Mailing Address TITLE OR POSITION Banks or Other Depositor	ories: List all banks or other depositories in aintains funds.	STATE Telephone Number	posits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or management of Bank,	ories: List all banks or other depositories in aintains funds.	STATE Telephone Number which the committee dep	posits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	ories: List all banks or other depositories in aintains funds.	STATE Telephone Number which the committee dep	posits funds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Deposite afety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	ories: List all banks or other depositories in aintains funds.	STATE Telephone Number which the committee dep	posits funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 110 of 146

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6. I		Organization, Affiliated Committee, Joint Fundra DRY COMMITTEE	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
- 8. [Fundraising Representa	tive Leadership PAC Sponsor
	Designated Agent: Identity	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A		
5	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
1	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
1	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositors of Eafety deposit boxes or main and the safety de	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
1	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor boxes or main and the company of the co	CITY A Tele ries: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 111 of 146

	d Organization		Joint Fundraising	g Representa	tive Leadership	PAC Spo
Pesignated Agent: Identif	y by name, addres	s (phone number – optior	al)			
Designated Agent: Identif	y by name, addres	s (phone number – option	al)			
Full Name						
Mailing Address						
Mailing Address						
				1 . 1	1	1
		CITY		STATE A	ZIP CODE	
TITLE OR POSITION		CITY A		STATE A	ZIP CODE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 112 of 146

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
BIG DAN RODIN	MER VICTORY COMMITTEE		
	₁ 50 S JONES BLVD STE 201		
Mailing Address			
	LAS VEGAS	NV NV	89107
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee	nt Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	STATE	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name _ _	ify by name, address (phone number – optional) CITY T	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the property of the property of the property of the property deposit boxes or make the	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 113 of 146

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connector	I Organization, Affiliated Committee, Joint Fund	reining Depresentative	o or Londovokin DAC Snon
HOUSE VICTOR			
Mailing Address	2318 CURTIS STREET		
	1		
	DENVER	, , , CO ,	80205
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
_	ed Organization Affiliated Committee	t Fundraising Representa	Leadership FAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Trundialsing nepresent	Leadership PAC Sp
esignated Agent: Identi		Trundraising nepresent	Leadership FAC S
esignated Agent: Identi		Trundraising nepresent	Leadership FAC 5
esignated Agent: Identi		Trundraising nepresent	Leadership FAC 5
esignated Agent: Identi		Trundraising Representa	Leadership FAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 114 of 146

h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	C
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NANCY MACE V	ICTORY FUND		
Mailing Address	228 S. WASHINGTON ST.		
Maining Addition	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representation	Leadership PAC S
esignated Agent: Identi	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identii Full Name	cy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 115 of 146

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address	ories: List all banks	CITY A s or other depositories in which	STATE A Telephone Number	ZIP CODE A sits funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks		Telephone Number	
Banks or Other Deposito	ories: List all banks		Telephone Number	
			Telephone Number	
TITLE OR POSITION	▼	CITY A		ZIP CODE A
TITLE OR POSITION	□	CITY A	STATE A	ZIP CODE ▲
		<u> </u>		
Mailing Address		<u> </u>		
Full Name				
Designated Agent: Identif	y by name, addres	ss (phone number – optional)		
Connecte	d Organization	Affiliated Committee X Jo	oint Fundraising Represe	ntative Leadership PAC Spo
Relationship:		CITY A	STATE	▲ ZIP CODE ▲
	ATHENS		GA I	30605
J				
Mailing Address	824 S MILLEDO	GE AVE STE 101		
Name of Any Connected VICTORIA VICTO	_	iliated Committee, Joint Fur	ndraising Representat	ive, or Leadership PAC Spons
4.			TEO ID Humber	r C
4.			FEC ID number	
3.			FEC ID number	
			FEC ID number	r C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 116 of 146

TITLE OR POSITION Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc. Mailing Address	ries: List all banks or		the committee deposit	s funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	ries: List all banks or			s funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	ries: List all banks or			s funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or			s funds, holds accounts, rents
Banks or Other Deposito	ries: List all banks or			s funds, holds accounts, rents
TITLE OR POSITION			elephone Number	
TITLE OR POSITION				
	▼	CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
Designated Agent: Identif	y by name, address (phone number – optional)		
Connecte	d Organization A	ffiliated Committee X Join	t Fundraising Representa	Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	IRVINE		CA L	92618
Mailing Address	9070 IRVINE CEN	TER DRIVE #150		
Name of Any Connected MIKE GARCIA VI		ted Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
4.			FEC ID number	[C]
			FEC ID number	C
3.			FEC ID number	C
2.				

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page 117 of 146

5(a)	or(h). Joint Fundraisin	g Participant:		
(9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4.			
6.		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
		. DO DOV 052429		
	Mailing Address	PO BOX 852138		
		MOBILE	AL	36685
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number - optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Te	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which t	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.			
	Name of Bank,			
	Name of Bank, Depository, etc.			
	Name of Bank, Depository, etc.			

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 118 of 146

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM MOORE J	OINT FUNDRAISING COMMITTEE		
Mailing Address	370 EAST SOUTH TEMPLE STE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 119 of 146

1.			FEC ID num	ber C	
2.			FEC ID num	ber C	
3.			FEC ID num	ber C	
4.			FEC ID num	ber C	
ame of Any Connected	Organization, Affiliat	ted Committee, Joint Fu	ndraising Represen	tative, or	Leadership PAC Spons
PFLUGER VICTO	RY FUND				
Mailing Address	PO BOX 30844				
			, , , M	D	20824
	BETHESDA				
	d Organization Af		STAT		ZIP CODE ▲ Leadership PAC Sp
Connected	d Organization Af	ffiliated Committee	loint Fundraising Repre		
Connected esignated Agent: Identify	d Organization Af	ffiliated Committee	loint Fundraising Repre		
esignated Agent: Identify	d Organization Af	ffiliated Committee	loint Fundraising Repre		
esignated Agent: Identify	d Organization Af	ffiliated Committee	loint Fundraising Repre		Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Af	phone number – optional	oint Fundraising Repre	esentative	Leadership PAC Sp
esignated Agent: Identify	d Organization Af	ffiliated Committee	loint Fundraising Repre	esentative	Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 120 of 146

h). Joint Fundraisi r	1	FEO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
NEHLS VICTOR	(
Mailing Address	1612 CRABB RIVER RD		
	RICHMOND	TX	77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or	(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	С
	4.		FEC ID number	C
_				
6. N	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	TEAM RONNY			
		-2-20/		
	Mailing Address	PO BOX 51522		
		AMARILLO	TX	79159
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
3. C	Pesignated Agent: Identify	y by name, address (phone number - optional)		
- 3. C	Designated Agent: Identify	by name, address (phone number – optional)		
- 8. C		by name, address (phone number – optional)		
- В. С	Full Name	by name, address (phone number – optional)		
- 8. C	Full Name	y by name, address (phone number – optional)		
- 8. C	Full Name	CITY	STATE A	ZIP CODE A
- 3. C	Full Name	CITY A	STATE A	
— Э. Е	Full Name Mailing Address TITLE OR POSITION	CITY A Te ries: List all banks or other depositories in which	elephone Number	ZIP CODE ▲
— Э. Е	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor baseling bases or main safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	ZIP CODE ▲
— Э. Е	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor baseling bases or main safety deposit boxes or main safety depository, etc.	CITY A Te ries: List all banks or other depositories in which	elephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1	1.		FEC ID number	C
2	2.		FEC ID number	C
3	3.		FEC ID number	C
4	1.		FEC ID number	C
	-	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	ONY GONZALES	S VICTORY FUND		
L				
	Mailing Address	12000 STARCREST DR		
	ivialility Address	STE 101		
		SAN ANTONIO	, TX	, 78247
	Relationship:	CITY A	STATE ▲	ZIP CODE A
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
3. Desi	ignated Agent: Identify	by name, address (phone number - optional)		
		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F	Full Name			
F	Full Name	CITY	STATE A	ZIP CODE A
F	Full Name	CITY A	STATE A	
F	Full Name	CITY A	1	
F N 	Full NameMailing Address TITLE OR POSITION Y	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
P. Bank safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositority deposit boxes or main	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
D. Bank safet	Full NameMailing Address TITLE OR POSITION Y	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
D. Bank safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositority deposit boxes or maintenance of Bank,	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
D. Bank safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
D. Bank safet	Full Name Mailing Address TITLE OR POSITION ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY CITY Tele es: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint	Fundraising Representative	ve, or Leadership PAC Spor
SHEDD VICTOR	Y FUND		
	PO BOX 365		
Mailing Address			
	MCLEAN	VA	22101
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee Affiliated Committee fy by name, address (phone number – option	Joint Fundraising Represen	tative Leadership PAC S
esignated Agent: Identi			tative Leadership PAC S
esignated Agent: Identi			tative Leadership PAC S
esignated Agent: Identi			tative Leadership PAC S
esignated Agent: Identi		nal)	tative Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – option	nal)	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – option	nal)	
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite aftety deposit boxes or mame of Bank,	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in	state Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in	state Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in	state Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in	state Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mame of Bank, epository, etc.	fy by name, address (phone number – option CITY CITY pries: List all banks or other depositories in	state Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
BICE VICTORY			
	PO BOX 21315		
Mailing Address	10 800 21313		
	OKLAHOMA CITY	OK	73156
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joint	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or market	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 125 **of** 146

h). Joint Fundraisir		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
ISSA VICTORY F	:UND		
	9070 IRVINE CENTER DRIVE		
Mailing Address	SUITE 150		
	I IRVINE		, 92618
Dalatianahin		CA CA	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depositions.	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depository, etc	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depository, etc	y by name, address (phone number – optional) CITY CITY To	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ig Participant:			
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
ame of Any Connected	Organization, Affiliated Commit	ee, Joint Fundrais	ng Representati	ve, or Leadership PAC Spon
GOODEN VICTO	PRY FUND			
<u> </u>				
Mailing Address	75 S HIGH ST			
	STE. 4			
	DUBLIN		OH	43017
Relationship:	CITY A		STATE 4	ZIP CODE A
Connects	d Organization Affiliated Comp	nittoo X loint Eu	adraining Panrasan	etetive Leadership BAC S
	d Organization Affiliated Comm		ndraising Represer	tative Leadership PAC Sp
	_		ndraising Represer	Leadership PAC Sp
esignated Agent: Identi	_		ndraising Represer	Leadership PAC Sp
esignated Agent: Identi	_		ndraising Represer	Leadership PAC Sp
esignated Agent: Identi	_		ndraising Represer	Leadership PAC Sp
esignated Agent: Identing Full Name	y by name, address (phone numb		ndraising Represer	
esignated Agent: Identi	y by name, address (phone numb	er – optional)		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and	y by name, address (phone numb	er – optional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone numb	er – optional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone numb	er – optional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone numb	er – optional)	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	g		0
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
WESTERN MICH	HIGAN VICTORY FUND		
	228 S. WASHINGTON STREET		
Mailing Address			
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi	Affiliated Committee	t Fundraising Represent	ative Leadership PAC S
		t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
HOUSE MAJOR	TY TRUST		
	228 S WASHINGTON STREET SUITE 115		
Mailing Address	223 5 W.G. III. G. I. G.		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or marked to the content of the con	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 129 of 146

5(g) or (h). Joint Fundraising	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	ı VA ı	, 22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE A
			Fundraising Representa	
8. De	signated Agent: Identify	by name, address (phone number - optional)		
8. De	signated Agent: Identify	by name, address (phone number – optional)		
—		by name, address (phone number – optional)		
— 8. D e	Full Name	by name, address (phone number – optional)		
—	Full Name	by name, address (phone number – optional)		
—	Full Name	CITY A	STATE A	ZIP CODE A
—	Full Name	CITY A	STATE A	
—— 9. Ba sa	Full Name	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
—— 9. Ba sa	Full Name Mailing Address TITLE OR POSITION Inks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or	(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
-				
6. I		Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	MCCARTHY VIC	IORY FUND		
	Mailing Address	PO BOX 30844		
	Mailing Address			
		BETHESDA	, MD	, 20824
	D.1."			
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
-				
- 8. [y by name, address (phone number – optional)		
- 8. I	Full Name	y by name, address (phone number – optional)		
- 8. [y by name, address (phone number – optional)		
- 8. [Full Name	y by name, address (phone number – optional)		
- 3. [Full Name			
- 3. I	Full Name	CITY A	STATE A	ZIP CODE A
- 8. [Full Name	CITY A	STATE A	
- !e	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	ZIP CODE 🛦
- !e	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main and the control of Bank,	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	ZIP CODE 🛦
- !e	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	ZIP CODE 🛦
- !e	Full Name Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mainly deposit boxes or mainly depository, etc.	CITY A Tel ries: List all banks or other depositories in which t	lephone Number	ZIP CODE 🛦

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisin			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
BRADY VICTORY	/ FUND		
Mailing Address	8505 TECHNOLOGY FOREST PLACE		
3	SUITE 702		
	THE WOODLANDS	TX	77381
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor dety deposit boxes or mail ame of Bank, epository, etc.	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraising			1	FEO :D :	. (
1.				FEC ID numbe		
2.				FEC ID numbe		
3.				FEC ID numbe	r C	
4.				FEC ID numbe	r C	
ame of Any Connected O	rganization, Affilia	ated Committee,	Joint Fundra	ising Representat	ive, or Le	adership PAC Spor
TEAM MCHENRY						
Mailing Address	228 S. WASHING	TON STREET				
	SUITE 115					
	ALEXANDRIA			VA	22	314
Relationship:		CITY A		STATE	A	ZIP CODE ▲
Connected (Organization A	Affiliated Committee	Joint F	Fundraising Represe	entative	Leadership PAC S
		Affiliated Committee		Fundraising Represe	entative	Leadership PAC S
Connected of conne		Affiliated Committee		Fundraising Represe	entative	Leadership PAC S
Connected Connec		Affiliated Committee		Fundraising Represe	entative	Leadership PAC S
Connected Connec	oy name, address (Affiliated Committee	optional)			Leadership PAC S
Connected of conne	by name, address (Affiliated Committee (phone number –	optional)			
Connected Connec	by name, address (Affiliated Committee	optional)			
Connected of conne	by name, address of	Affiliated Committee (phone number –	optional)	STATE A		ZIP CODE A
Connected of esignated Agent: Identify it Full Name Mailing Address TITLE OR POSITION anks or Other Depositoric fety deposit boxes or main arme of Bank,	by name, address of	Affiliated Committee (phone number –	optional)	STATE A		ZIP CODE A
Connected of esignated Agent: Identify the Full Name Mailing Address TITLE OR POSITION Tanks or Other Depositorie fety deposit boxes or main arme of Bank, espository, etc.	by name, address of	Affiliated Committee (phone number –	optional)	STATE A		ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) c	or(h). Joint Fundraisin	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	NUNES VICTORY	′ FUND 		
	Mailing Address	PO BOX 6545		
		VISALIA	CA	93290
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma	CITY Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank,	CITY Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	CITY Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	CITY Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	. Joint Fundraising	Participant:		
	1.		FEC ID number	C
;	2.		FEC ID number	C
;	3.		FEC ID number	C
	4.		FEC ID number	C
	-	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET #115		
		ALEXANDRIA	L VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Organization Affiliated Committee X Joint F		ative Leadership PAC Sponsor
		by name, address (phone number - optional)		
	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name _ _ _ Mailing Address	CITY A	STATE A	
9. Ban safe Nan	Full Name	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
9. Ban safe Nan	Full Name Mailing Address TITLE OR POSITION hks or Other Depositor Pety deposit boxes or main me of Bank, pository, etc.	CITY CITY Tele ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

. 1		FEC	ID number	C
1.			ID number	C
2.				
3.		FEC	ID number	С
4		FEC	ID number	C
	Organization, Affiliated Committee	, Joint Fundraising	Representativ	e, or Leadership PAC Spon
HUDSON FREED	OOM FUND			
Mailing Address	228 S WASHINGTON ST STE 115			
	ALEXANDRIA		VA VA	22314
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
П.				
Connecte	d Organization Affiliated Committee	ee X Joint Fundrai	sing Represent	ative Leadership PAC S
	d Organization Affiliated Committed / by name, address (phone number -		sing Hepresent	ative Leadership PAC S
			sing Hepresent	ative Leadership PAC S
esignated Agent: Identif			sing Represent	ative Leadership PAC S
esignated Agent: Identif			sing Represent	ative Leadership PAC S
esignated Agent: Identif		- optional)	sing Represent	ative Leadership PAC S
esignated Agent: Identif	by name, address (phone number -	- optional)	STATE A	
esignated Agent: Identif Full Name Mailing Address	by name, address (phone number -	- optional)	STATE A	
esignated Agent: Identif Full Name	ries: List all banks or other deposito	- optional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mails are of Bank,	ries: List all banks or other deposito	- optional) Telephone	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposited afety deposit boxes or mails are of Bank,	ries: List all banks or other deposito	- optional) Telephone	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ries: List all banks or other deposito	- optional) Telephone	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
STIVERS VICTO	PRY COMMITTEE		
	<u> </u>		
	228 S WASHINGTON ST STE 115		
Mailing Address			
	1. EVANDENA		00044
	ALEXANDRIA	L VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Represent	Leadership PAC S
	Affiliated Committee Join Join Strain Join Strain S	nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the state of Bank,	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mane of Bank,	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional) CITY ▲ Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	C
3.		FEC ID number	С
		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
SCHWEIKERT VIC	CTORY COMMITTEE		
	228 S WASHINGTON STREET STE 115		
Mailing Address			
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name	by name, address (phone number – optional)		
Mailing Address			
	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION \		1	
TITLE OR POSITION V]	elephone Number	
			o fundo heldo cossumta
anks or Other Depositori	es: List all banks or other depositories in which		s funds, holds accounts, ren
anks or Other Depositorional defety deposit boxes or main arme of Bank,	es: List all banks or other depositories in which		s funds, holds accounts, ren
anks or Other Depositorional defety deposit boxes or main arme of Bank,	es: List all banks or other depositories in which		s funds, holds accounts, ren
anks or Other Depositorical deposit boxes or main ame of Bank, epository, etc.	es: List all banks or other depositories in which		s funds, holds accounts, ren

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1 1 1 1 1 1 1 1 1		FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	[C]
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SCALISE LEADER	RSHIP FUND		
Mailing Address	PO BOX 9891		
	ARLINGTON	, , VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number - optional)		
Full Name			1
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A	ZIP CODE A
Mailing Address TITLE OR POSITION anks or Other Depositor	ries: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material ame of Bank,	ries: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material ame of Bank,	ries: List all banks or other depositories in which	elephone Number	
Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or maintain ame of Bank, epository, etc.	ries: List all banks or other depositories in which	elephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisin	J		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MCCAUL VICTO			·
Mailing Address	PO BOX 341027		
	AUSTIN	TX TX	78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	. Joint Fundraising	g Participant:		
	1.		FEC ID number	C
:	2.		FEC ID number	C
;	3.		FEC ID number	С
,	4		FEC ID number	C
	me of Any Connected (Organization, Affiliated Committee, Join	: Fundraising Representati	ve, or Leadership PAC Sponsor
_				
		ı 75 S HIGH ST		
	Mailing Address			
		STE. 4		40047
	Polosia della	DUBLIN	OH	43017
	Relationship:	CITY ▲ Organization Affiliated Committee	STATE A Joint Fundraising Represer	
	ignated Agent: Identify Full Name	by name, address (phone number – optic	onal)	
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
			Telephone Number	
safe Nam	nks or Other Depositor ety deposit boxes or maine of Bank, pository, etc. Mailing Address	ies: List all banks or other depositories in intains funds.	which the committee depos	sits funds, holds accounts, rents
		CITY ▲	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 141 of 146

Mailing Address TITLE OR POSITION	ories: List all banks	CITY cor other depositories in wh	Telephone Numb		ZIP CODE ZIP CODE nds, holds accounts, rents
Mailing Address TITLE OR POSITION Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks		Telephone Numb	per	
Mailing Address TITLE OR POSITION Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks		Telephone Numb	per	
Mailing Address TITLE OR POSITION Banks or Other Depositors afety deposit boxes or main and the safety deposit boxes or	ories: List all banks		Telephone Numb	per	
Mailing Address TITLE OR POSITION Banks or Other Deposito	ories: List all banks		Telephone Numb	per	
Mailing Address TITLE OR POSITION			Telephone Numb	per	
Mailing Address	▼	CITY A			ZIP CODE A
Mailing Address		CITY A	STA	TE A	ZIP CODE A
Tun Tune					
Full Name					
Designated Agent: Identif	y by name, addres	s (phone number – optional)		
Connecte	d Organization	Affiliated Committee	oint Fundraising Re	presentative	Leadership PAC Spo
Relationship:		CITY A	S	TATE A	ZIP CODE ▲
	RIFLE			CO	81652
Mailing Address	PO BOX 752				
•		iliated Committee, Joint Fu	• •	entative, o	Leauersnip PAC Spons
	0		J tustat		
4.			FEC ID no		
3. <u> </u>			ຸ FEC ID ກເ	ımber C	
3.			I LO ID III		
			FEC ID no		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
FALLON VICTOR	RY FUND		
Mailing Address	PO BOX 3653		
	DUBLIN	OH	43016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

P.O. BOX 6545 VISALIA Organization	ated Committee, John City A Affiliated Committee (phone number – committee)	X Joint	FEC II	CA STATE A		- ODE A
P.O. BOX 6545 VISALIA Organization	CITY A	X Joint	FEC III	onumber oresentative CA STATE	re, or Leadership P]-[
P.O. BOX 6545 VISALIA Organization	CITY A	X Joint	raising Rep	oresentative CA STATE	re, or Leadership P	
P.O. BOX 6545 VISALIA Organization	CITY A	X Joint	raising Rep	CA STATE	e, or Leadership P	- ODE A
P.O. BOX 6545 VISALIA Visalia by name, address	CITY Affiliated Committee	X Joint		CA STATE A	93290 ZIP C	
P.O. BOX 6545 VISALIA Visalia by name, address	CITY Affiliated Committee	X Joint		CA STATE A	93290 ZIP C	
P.O. BOX 6545 VISALIA Organization by name, address	Affiliated Committee		Fundraising	STATE A	ZIP C	
VISALIA Organization by name, address	Affiliated Committee		Fundraising	STATE A	ZIP C	
VISALIA Organization by name, address	Affiliated Committee		Fundraising	STATE A	ZIP C	
VISALIA Organization by name, address	Affiliated Committee		Fundraising	STATE A	ZIP C	
Organization /	Affiliated Committee		Fundraising	STATE A	ZIP C	
Organization /	Affiliated Committee		Fundraising	STATE A	ZIP C	
by name, address	Affiliated Committee		: Fundraisino			
by name, address			Fundraisino	g Represen	tative Leadersh	nip PAC Sp
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				STATE A	ZIP CO]
V	1				1 1	
		Te	elephone N	umber _] – [
_ _	,	es: List all banks or other depositorie	CITY A Teles: List all banks or other depositories in which	CITY Telephone N s: List all banks or other depositories in which the commi	Telephone Number State ▲ Telephone Number State ▲	Telephone Number

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

	Full Name Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which the comm	
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone I ries: List all banks or other depositories in which the comm	STATE A ZIP CODE A Number
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY Telephone I ries: List all banks or other depositories in which the comm	STATE A ZIP CODE A Number
	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY Telephone I ries: List all banks or other depositories in which the comm	STATE A ZIP CODE A Number
9.	Full Name Mailing Address TITLE OR POSITION Banks or Other Depositor	CITY Telephone I ries: List all banks or other depositories in which the comm	STATE A ZIP CODE A Number
8.	Full Name	CITY A	STATE ▲ ZIP CODE ▲
8.	Full Name	CITY	
8.	Full Name	by name, address (phone number – optional)	
8.	Full Name	by name, address (phone number – optional)	
8.	Full Name	by name, address (phone number – optional)	
8.		by name, address (phone number – optional)	
8.	Designated Agent: Identify	by name, address (phone number - optional)	
		d Organization	
	Relationship:	CITY A	STATE A ZIP CODE A
		, IRVING	, TX , 75063
	Mailing Address	PO BOX 630167	
6.	Name of Any Connected BETH VICTORY F	Organization, Affiliated Committee, Joint Fundraising Re-UND	epresentative, or Leadership PAC Sponsor
	4.	FEC I	ID number C
	3.		ID number C
	2.		ID number C
	1.	FEC I	ID number
		-	
5(g) o	or(h). Joint Fundraisin	g Participant:	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisir	•		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
VICTORY 2022			· · · · · · · · · · · · · · · · · · ·
Mailing Address	22780 INDIAN CREEK DRIVE, STE 100		
·			
	DULLES	VA	20166
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
FISCHBACH VIC	TORY FUND		
	824 S MILLEDGE AVE		
Mailing Address			
	ST 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Join y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi	y by name, address (phone number – optional)	nt Fundraising Representa	
esignated Agent: Identing Full Name	by by name, address (phone number – optional)	state A	Leadership PAC Sp
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